

Hemlock

Jan 4th. 17  
D-Merry Carl 6

Nerv ~~?~~ (apt.) . 43.

Operations a thurs. . & lvs - ut. 1903.

Baby in 1904 . : Nerv. back down. nervousness

2nd baby 1907. - lvs - x 9

1911 Nerv. - after - lvs - lvs.

1915 - curdling.

1916 Nerv. - lost blood - Curdled in 1910. Left  
& now. Left Nerv Home now. Nerv.

regular.

lv. a st. but at 19. was better. & never robust.

Nerv. cannot sleep - has nervousness - lvs - well ut  
after lvs. & lvs in 3 m. - was pulling lvs. ut. now

had lvs. - Back weight. 8. 2. now. 7. 5/4.

Nerv. - over head & face - in lvs & along right side  
not high - Nerv. but face - now fatter - sleeps very little

1 lvs & now - . Nerv. regular - Face good appetite

Ulcus ventriculi?

Dr Foregalt York

Jan 8. 17

~~Foregalt~~ 49. York.

Bur. in stomach. for 12 mrs. - indig. & vomit  
& sometimes bad & never vomit but nauseated. Stagnant  
in back - only shut. Food. sometimes vomit but  
not always, but a bit - but not much. Sleep restless.  
Worris about. was a bit. V. h. m. had long illness about  
40 yrs. had 12 mrs. & eventually he told me had been  
down & had stomach bad & he chopped up in stomach &. Dishes  
badly. man - Can do work - not heavy. Aph - fine but not  
much help. Bowels. regular - worse. Dr. F. said no harm  
but helped the bowels. Tea. Coffee. Shew - small mod.  
To the food. - m d of Cancer. B. 3 65. all living. named

was to living. 20. . no bad dis.  
Wore an am. band - The burning not in bed - not rubbing  
used to rub it - a pain - a burning. harsh on that -  
may be all day. thro. towards dinner time more severe & better  
after dinner. never vomited, felt sick. nothing not drank  
alcohol.

1) Grey. conf. 2) well known, 3) not ancient. 4) tongue found. 5) about  
not des. 6) Stone not dest. 7) Red neg. py not to felt. 8) sagging  
and 1. 9) as a var man. 10) when abundant. 11) when abundant  
12) probab. when. 13) dist. 2) total of m. 1) large. 4) about 3 mrs  
operato.

Sick spleen.

D-Schwartz

28.1.17

Sacro-thoracic arthritis

2nd edition, 1917

~~18~~ 36 10 Farley Rd. W. Hampstead, ~~Hampstead~~

18 years ago when walking had ended with in middle of walk  
got more prog. & a permanent to pain in both legs & in two mos-  
3. gave up could walk but joints made noisy. & had awful  
night with hor. pain all over, chiefly down the legs. Sent to  
Hall for sedative. Had & could hardly have bath. At last got  
worse. Gradually... pain & weakness - never so that could not  
walk at all. Only going to pain could not walk. Was  
in bed 3 or weeks. Pain the dominant thing. Pain was  
when quiet & of moves about. Of breathe deeply & chest. State  
has kept in, - better. To day a year in bed. pain & weakness  
for small of back to feet. Pain worse at night - of moves it,  
weakness, rest not take to it. Then all the time, not as well  
has been in shells - at frequent intervals. Shivering - & hot feet  
chief. Pain in back & shoulders. But sleep in legs. Had attacks in  
which could not keep feet on ground. - Asperin helps. Better  
Calaf. when don't walk & never more, what other no. well  
no loss in weight. Eye light but - not worse. Legs are thin  
now. To day walked on 11.90 till one. Starts off with. As yet  
then none out of motion an movement but not in back.  
no trouble with ~~heart~~ heart vessels & bladder. No loss of sensibility.  
no actual weakness. Only the pain... In bed 2 mos off & on.  
with the pain. Nothing in + my plate.  
1) Swelling & indistinct sept. 1916 was both sides - 8 years ago. now of  
anything less. Then bigger in oct. than now.  
2) Spleen which burst in Sept 1916 in Wall. Dr. Case.

1. Good column. 2 no emaciation. (3) walks well but stoops a bit - the knees - bent. - Has not walked freely for more than a year - no swelling of other joints. (4) Marked def. of back - bilateral - very over sacro-lumbar joints: & the whole sacral region looks stiff - swollen - then not reddened. The swelling on diff. - nothing special to be felt - but painful along the art. on both sides. & also over the sacrum. All more or less possible but lateral & lat. restricted. No swelling of muscles. No dist. of vessels - anywhere. Nothing in sacral nerve. Blood & red. norm. R.F. def. to get but active with reinforcement. Baby not bright. Somewhat B. phos. notes - most of the lower segment of sacrum. The shadows at art. - sac. l. look normal. & sac lower not involved. Spleen. enlarged. & T. 6 unaltered. edge palpable. 50 Oct 16. R. 5. m. Wt. 8.00. Lg. 29 1/2 Poly 63 In Nov. 16 foundly. - Poly in 36. Lg. 20 "def. spleen - ovalation. Had by mother & aulog. Puer. race, Dec. 16 R.C.C. 4. Leucy. 8.00. Poly in 53 On Hayden. R.B.C. 5-5.0000. Leu 3500. P.N. 65. Lg. 25 - June 22 and 1917.

27. X. 11. 17. Treat for on Knox since & d. med. in Oct. 1 & 2 lines rec. 5 lines. med. 16 treatments.

1) Can walk better 2) No pain practically. for a month - a dull ache in back = 3) No emaciation. can now do everything - looks a little after walking & get pain. If - much it catches him & also sometimes down both legs into my hand. Sleeps well. 1) looks well. 2) spleen still large. hardly 4) Grays br. below what under 3) no gland in any region. 4) Ball remarkable. motion good. Two pads of Oak in sacro-lumbar region & a broad swelling in sacrum. but neither look like def. curves. 16.5.500. Difference gone.

Abd. Pain - possible both are,

15.7.17

remarkable case - see St. Thomas

Dr. E. Allen

9. ~~Edison~~ 38

The Penck Buissey

original paper on the  
pain in aortic aneurism.

I had it in 1913. 9 A.M. in a.m. came on after taking a  
shower & it gradually came on. - Kept working with pain every  
day, never free. & laid up over 6 mos straight off. In bed all  
the time - never free. & almost could come to food not.  
the slightest. Sleeps badly, restless pain bad. Walks very much.  
(2 m. aug. not sleep 1/4 - hour or 20" without waking), 9 A.  
up & 5 A. about - does no work since, not free from pain  
for a week. worse when up & about. No drinks. Not  
constipated. always in upper abdomen. No drinks. Not  
without being in agony. & terrible when sleep. "must hang out  
in a shed that is a bit low" it is worse at times - in shall test  
for an hour. ~~not~~ Belcher would. - does it a good bit. - rolls in  
at times.

V. h. before. inf. headache. Good family - husband: 7. f. 6f.  
married 15 years - children 3, healthy.

1. looks pained & worried. ment. good. - not a very man
2. Abd. a little full in epig. - diffuse pulsation (a) in epig., in  
bit more to the left than normal. - but not excessive (b) wide  
spread slight retractile puls in costal borders & 9th. 2-3 inches  
up. in rt side most. - certainly not normal.
- 3) no diff. heavier felt in palpation. the throbbing is marked, but  
acute not bad. The pain is excessive & he moves it one when  
a shock is given to the abdomen. No diff. palpation  
diffuse pulsation but no shock felt with fingers & deep pressure  
over costal margins & it is variable.

- 4) nothing visible or palpable behind
- 5) no bruit. back or front. or at least wh. seems right
- 6) Pul. in femoral. Rashad at lit slip.

30. X. 17 Beavers did a resection today. & there was found 1) an unusually small space between the abd. wall and the spine. 2) an adenoma the size of a walnut in the liver 3) no adhesions indicating an old abscess 4) the aorta felt thickened & hard but there was no aneurysm. altogether there was nothing to account either for the pain or for the wide spread pulsation  
Now it remains to see the operation per se will cure.

Chronic Parotitis  
remittent case.

Dr. Cardew. 13.XI.67

Nrs ~~██████~~ 54 Cheltenham

- R. h. woman. not strong. - 2<sup>nd</sup> fever. at 18. heart affected  
fever. ~~no~~ children. never very strong. Bronchitis.  
an acute swelling. set after an illness in hospital  
P. J. began 8 or 9 y. ago; the rt par gland swelled & pain & pain  
and a then little fire & discharges. at first did not discharge. now  
has disch. 2 or 3 years - broke externally - Dreadfully. then changed  
worse, swell & more & discharges more. - swells up & bursts - now  
a month in this state - then free no discharge & swelling & down.  
no disch into the mouth. - Pain incessant. day & night  
1) Skin of whole rt. parotid region covered with yellow grey crusts  
2) whole gland enlarged. edges brownish. <sup>red</sup> well defined. It - now  
in reduced state. when swollen is very big & weeps at front clear & then  
a sort of pusulent.  
3) papules on cheek - lit red - no secretion? coming out  
4) sensation good - very sensitive to touch. no 7th nerve  
sent to Turrell.

Miss ~~W. B. Hume~~ 35 Cheltenham -

1. the noticed tremor . 6 y. ago - short - sleeping with head who had append. - not in the hand. - could hardly write. never did stop. passed off. - had it in & off it continued. 3 y. before a has not cleared. more sometimes - always then - stops in sleep - Had in arm on whole. Each makes more - no pain - Had tremor in other arm - 3 years - had it 8 yrs. & since that have it arm more. (Puls. with writing & has to use two hands for drinking). When at rest not altogether quiet keeps twitching - can feel the little nerv. lurching (t-chon)

2. V. b. g. (2) arm moved lurching (3) coarse tremor - large - more on right & left hand out. - quiet at rest. but lurches a little & she can feel it. whole hand moves. Can touch left & more well without much shaking
- 4) no crawling <sup>small units</sup> (5) no loss of power (6) no an. castless (7) Radial pulp. perhaps a bit smaller than left but diff. to feel as the tremor is disturbing (8) no special tenderness of neck - not suggests of cerv. rib. (9) Thump does not pass as deeply rth. as left into the superficial space (10) Subit. pulsat. certainly more evident rth. than left. - visible & palpable. - Whole thing increases from a central rib. thro. I have never seen a case like it

Mya Tawall

Chattan houn





Loose ends, great colour, cold hands,  
no shill, lungs now congested, rt foot  
distinctly congested looks full even ankle, &  
lth to outer margin, inner surface, ft swell,  
also slyly swollen marked cyanosis, the thick  
very marked along outer margin esp lower to sole;  
cure of instl treatment, but fearful to touch  
skin loose everywhere becoming anæsthetic -  
infiltration very quickly noted when elevated  
marked heat, dark at edges, not palpable, well marked  
in lft. posterior lth not felt in right & lft  
posterior felt no roughness felt in bone s,  
marked brownish discoloration over clavicles  
trans. infiltration along tendons. reflex present

Feb 2, 17. F. still very ill but in bed. dor. swollen, brown, very hot  
& puls in area of nerve swelling outside edge & redness. (B)  
very marked at under surface of clavicles. (C) arm to for 8 hrs  
no puls - red & hot & rigid - better in day of sleep at night.  
Tears not so blue...

Archie MacArthur.  
all his heart

6.13.01

Dr Martin.

~~Archie MacArthur~~ 42 Lynchburg Va

seems played out 'gets up tired cant stand any  
exert. feels bad about head. nerv. seems like some sort  
of poison or in S. broken down from my heart, excit. heart.  
too loud. SUFF little aphasia, not at clear than a year  
last summer, nervous all the little aphasia or conf. of mind.  
passed off. Two years all of a sudden what they said  
seemed the "quickest thing in the world". Depressed all the  
have no energy not Capress - no nerve. Lasted since  
1 1/2 years. In '85 had fever 2 w. terrible pain in back lasted  
4 yrs. Lost 115. Gradually better in '88. intense suffering.  
'transit' - no account. Then lost Rh. S.S.S (no general dis.  
got better. Grad. Tell 1 1/2 y ago. For last year feeling awful  
rotten. Lungs ill. , worms & cures. very depressed & blue. "have  
no legs. I have a lump in my legs. Knees tremble  
little hardly walk. Terrific in mind (Dr Martin) Touch  
of malaria. I believe they are just guessing.  
For 10 y. terrate, not hunger for. Tobacco none. Gained in  
weight. Stomach as usual with. urine all night scanty  
& high colored. Sleeps well - no bad dreams.  
Has been utterly pumped out in a race.

1. Parth
2. Ergin
3. S. S. S.

Well nourished - muscular looking man. Eyes

look a little heavy - orbit a little infiltrated.  
Tongue is clean. Pupils are equal - react well to  
light. Pulse is regular - tension a little plus. Pulse  
recurrent. 4 m. reflex active. Apex beat in 5th -  
inside n. l. - No increase in "area of cardiac  
flatness. Slight throbbing in vessels of neck. In  
aortic area a well marked diastolic murmur.  
The maximum is at the right third costal car-  
tilage - well heard down left sternal border.  
Murmur is transmitted towards the apex -  
no rumble in diastole at the apex. No pulsa-  
tion over the manubrium. No special pulsa-  
tion in vessels of neck. Examining the apex  
more carefully - when he stoops over it is visible  
in 5th - just outside the nipple. Both sounds are  
well heard at the apex - and there is a soft  
transmitted diastolic murmur. No distinct  
Corrigan pulse. Pulsation in vessels is visible. As a  
young man he was addicted to athletics - pulled  
in boat crews - a sort of all round athlete for

about four or five years. Dr. Bartholow  
20 years ago examined heart and said  
he had a lesion of the aortic valve - would  
never be any better - but would gradu-  
ally grow worse. Began hill climbing  
and <sup>good deal of</sup> trouble. Was examined by Dr. Loomis  
about 8 yrs. ago - who said as far as  
heart was concerned he might go in  
the prize ring. Has caused life insur-  
ance many times since.

In 7.7. Pearle 32

C. invs of the pulse Reg. of the life Ins.

Passed pres report. 2.7. ago looking 4 ann. Q order  
send an intermilling. V. h. m. until ear visible  
but Jan. - middle ear des. all well now. No other  
diseases. No more any intermilling.  
note on the yellow. sleeps on right side. Not short  
of breath. Plays golf. gets diff. leaves over. Fast walker  
7 H - good. On d e of breast. Father alive. healthy.

Send man. V. under report when  
a r. ins. N L - not diff. no shock no inter. Flashes  
on 4th. r. st. & N L. On <sup>yellow</sup> ~~red~~ parts send down. a & b.  
a & c. a soft apex but not constant. at base in recurrent  
posture apex but more distinct. disapp. on all invs. a distinct  
also at base. No acc of a 2nd sound.

Table 1/60 Sky.

at 35.

1.8.9. 05. W. 235. 0h. 3 lines abt. & t.c. found in  
life Ins. 4 ann. Last line by Pleuro. only  
a few hyaline & one 8. intermilling. no more intermilling  
in gas. worked hard. gives a great up. not  
much to be seen. many inter. Good appetite. 1/2 lb. of  
2 meals a day. no coffee. 0  
3l. pr. Kim Rocci 240 - Ramsey - 400, 70 - dist. 140

I-19-05. He looks very well; 100% color: no anemia. Tongue is clean. Seven years ago had an episode of fever in the winter and summer. Radial not palpable. A. b. palpable in 4th, 10th-12th r. s. I. a. c. f. lower border of 4th, r. s. E. Manubrium is clear. H. s. are clear at a. and b. No accentuation of aortic second. An occasional drop in the beat of the pulse.

Int. of Public Health: (Epidemiology)

B. C. 48.

~~\_\_\_\_\_~~ : Elton ... to Chapman

named 6 Jan 2 children youngest 17 mos.

Complaints of heart attack are more severe. The  
more and older of the - in fact, will never  
relieve of pain. Don't get angry.

R. ... at 10-12. ...

It is now well, - before not at all and short  
of weight - though not now.

am in right lung severe and fat suffered much with  
not spit up much. Lost in weight 15 lbs - or 125.

mine is in the left side of stream. as usual some 34. feet  
above the level of the sea. The steep bank on the right  
high and the right side with a few trees.

Looks very well - color good - lips are not blue - usually a little pale - no thickening of the joints at all. Heart's action is forcible. Percussion is clear in front. Breath sounds are clear at both bases. Apex beat

is outside the nipple line - forcible - no definite thrill - slight systolic over body of heart. So the right of sternum both sounds are clear - no murmur. On manubrium the second is well heard - soft diastolic. This becomes louder and more intense

heard in

diastole

in

in the second left inter-space - where there is also

a soft systolic. All along the left sternal margin the double murmur is quite intense loud over the body of the heart. Apex beat very loud - rough systolic - shock of the first also felt. Murmur is transmitted well into axilla. There is no murmur with diastole below the fourth rib. It is heard well in the sternum to the fifth rib. Systolic murmur is propagated with the greatest intensity

to the back on both sides. It is heard  
as low as the renal.

Pulse is full in volume quite  
regular not collapsing.



1. 6. 99

Today patient is evidently very nervous and upset. No essential change in the cardiac condition. Apex beat is a little outside-regular-forcible. Bruit is loud-heard in the mid-apilla. The first sound is heard at the angle of the scapula-but not the murmur. It is not heard in the pulmonary area. Second pulmonary clear. Advised to take moderate exercise-live a quiet life-no sudden exertion.

1-15-24. In sitting posture upper lip slightly everted. Both  
nostrils are open and clear. The tongue is not retracted; it is  
everted at the same time I have never heard it: not heard at the vol-  
untary time. Both nostrils are clear at the time. A little swelling  
of the premaxilla. Liver is not enlarged. Spleen not enlarged.  
Right kidney not enlarged.

7-16-94. Solon is Solon, I. E. is in. Much of time will

felt. Perhaps a little precordial bulging. Very soft, rather distant aortic systolic, of much less intensity than normally; scarcely audible, except when the breath is held. No distinct murmur. In the r. p. murmur is scarcely audible. Slight acceleration of pulmonary second. Abdomen looks natural; no fulness in right iliac fossa; no tension; no special pressure; one can roll the head of the caecum and probably the appendix under the finger; not painful; no thickening along the iliacus fascia.

Suspected cardiac disease.

Dr. Burgess  
Stretton, W.  
Oct 31st.  
Dr. Burgess  
said little or  
nothing

~~11-12-1900~~ 21 139 Bond Street (R.D.) (Jews) 2nd.

Dr. B. said valve of heart, feels a bit of br. - even since a lady.  
+ of ran get out of breath - not much now. Now, last Apr. caught  
chill. fell in faint. sh. mine - swoon. not. looks well. diff. - not  
now. Best weight 81.3. 3 now before 10.8.

was Rheumatic a child not joint infl. has had "murmuring of the  
heart" as early as ~~1885~~

1. On repeat. no enlargement. ap. in normal situation. no thrill  
no murmur. at ap. or base. clear. (2) on Ex. d. - card. resp. brunt  
with 4/4 each. (3) after heavy exertion. a soft apex brunt a stage card-  
resp. but the soft apex is heard when he holds breath.

(1) + 80 shows a.

2) & 60 -

(3) chest

~~St. Lawrence~~

44. 42a.

2mm Board. refer. In A + 18-year

Malar. as by spiro in Honduras, Argentina in 80-88. occurs in 92 also. with severe attack Mexico, 93 same, low, in mean time. Texan and in Texas. H. Meyer 94-97. almost certain. Parasites, testicular. Had stomach with 2 peculiar imprints in spec per 10 grains. Histology of hard full & c. & rub. in Rb. river. Mus. Paris & New York. Described. wooded a type. No typhoid. Went again toward yellow fever. In us healthy for some months, but sick several times. Has natural presentment after eating or not wake at night. Her. & high fever. Reg. ven. cured. Married. 2 child. Broken up a dam. R. I. & no parasite.

Looks a bit sallow - a little anaemic. Conjunctivae are a little watery. Pupils dilated. He is evidently very nervous. Pulse is rapid. Good deal of fine muscular tremor during the examination. cold-moist hands - cold feet. Very active skin reflex - vasomotor flushing. Arteries are not sclerotic - no increased tension. Apex beat just visible - in fifth - within the nipple line. No shock - no thrill. Both sounds are clear at apex -

first a little muscular - clear in sub-  
monsary region - perfectly clear at  
base. No cardio-respiratory mur-  
mur. After exertion (rapid move-  
ment of the arms) heart acting very  
rapidly - 36 to the ~~minute~~ quarter.  
Soft systolic bruit at apex in recum-  
bent posture - no thrill. <sup>Two minutes</sup>  
later in recumbent posture apex bruit  
is gone - and the subsc is at 96. Cardiac  
flatness lower border of fourth - within  
the nipple line - and at left sternal border.

Pulsation in abdominal aorta, which  
has been very marked for ten years. It  
often produces a sensation of faintness.  
Abdomen is flat - natural looking - ex-  
cept for the increased pulsation of the ab-

Abdominal aorta. Stomach tympanic  
is low. Slight gastroptosis. Right  
kidney easily to be felt on deep  
inspiration. Edge of liver just  
palpable on deep inspiration. Area  
of liver ~~thickens~~ flatness not in-  
creased. Edge of spleen is easily  
felt on deep inspiration descends  
about an inch below the costal  
margin - is firm and hard.



1. Cat ladele.

2. dead nestle

(2) radium



increase in the area of cardiac dulness. Heart sounds are clear at the base - aortic second not ~~accentuated~~ intensified. Sounds are clear at lower sternum. At apex a well marked cardio-respiratory murmur during inspiration - generally two-puffed - with each inspiration - which is synchronous with the heart beats - then two, sometimes three beats without the cardio-respiratory murmur. When he holds the breath no murmur - at the end of deep inspiration no murmur. At the apex there is a regular rhythm - two beats during the height of inspiration - associated with a puffing murmur and then three - sometimes four beats without. It is heard round in the axilla. After exertion the same rhythm - murmur a little more intense - no murmur in vessels of neck - no murmur in subclavian.

Post. typhoid phlebitis  
D - p. has. operat. for osteo  
myelitis.

57. 8.00

~~18 Nov. 1891~~ chesterton Ind (Dr Simmons)  
Ill for 3 mos.

18 mos ago typhoid fever. fever, severe. came after  
it. was a swollen in had the fever. grandly put  
him down. His mouth could get about 2 or 3 mos.  
well & hearty, used sticks & drugs. swollen & weary.  
More at night, no pain except when ill. Now has  
(in Dec) again went to doctor who said he could  
do no good. Had him. Dr Muller operated  
for osteo-myelitis. is painful. Bad stomach. cold.  
In week 5 w. after operat. could not eat. Left Feb. 2 pm  
2 mos. worse & could not sleep; yet, now using self  
still.

Healthy looking man - good color. Tongue is clean.  
No tphi. Pulse is good - regular. Left leg a little  
uniformly larger. There is now very moder-  
ate enlargement - no oedema. Pulsation in  
the artery is well marked - no definite cord  
in the vein. Distinct slight enlargement  
of the superficial veins of the thigh. Skin

reflex is very marked. Abdomen is full-  
nowhere specially tender. Spleen is ~~en~~  
not enlarged. Liver not enlarged. Heart  
sounds are clear. Apex beat is in good  
position - no increase in area of cardiac  
flatness. ~~Is~~

Mr. Day is positive that when he went to Dr.  
Miller's Sanatorium he had no pain at  
the head of the tibia - nor any swelling.

Tuberculosis  
& asthma.

Orestes Brightley

July 11/10

~~11-7-10~~ 55-

74 Good. It. all life - games. to prison in '82. 4.5.

after pleurisy & asthma period all of which. several years. died out.  
and one year ago. all this life severe. influenza. 2-3 yrs. from  
'82 - for 14.5. long life 8 ft. at end of prison. more than ever. & after  
3 years & 2nd prison. Jan 1900. had influenza. kept constant cough. very  
violent. Golden Summer. tub. was diagnosed bacilli in sputum.  
Then 3 mos. 'new reg. 1901. South of the T. took up work 1901. Then  
had to give up for a while. Had lost 1 1/2 stone swollen gland in neck &c  
Spasmodic cough. never slept sweetly. time then was severe you  
had occ. small haemorrhages. was then in to end of 1905 found  
unimproved. year by year. went down. Began to take ex. got. &c. Ten  
about 1906. all in face. Told that T. b. 1906-7 sev. & the wife  
all & died in 1907. cough to nurse. & did very much. kept well  
then 1908. at home & nothing a.c. except no sun. in a ship to  
home & a little no other. 1909 S. very severe. & about & at various  
times with only with ideas. was in. Dr. said about it was not  
heart. with more & less. & if better some time Nov.  
Sept 7 or 8. & over then Dec & Jan. then abroad & coughing. & in  
way to S. of home & saw Coleman (L.C.). who said sputum in & a few  
bacilli. again saw a few very small. Feb saw Dr. Coleman. patches  
in lung & dilat. of the heart with liver enlarged. That at last. then  
nurses. took in much bacilli & in April better. & able to walk in prison  
home. Had increased in weight & with a more weight. Saw surgeon.

said '9 p.m. cardiac dilatation' & went down 'the stage' it never  
danced, it gave 'manned life', then Dr. X ray with a result was con-  
firming & further was pleased with admission as a left end. That  
refused. P.S. same home not so well. 2<sup>nd</sup> of breath & going up stairs  
and pedaling at night. Heart in to a c. cough & expect. at present. In June  
mass. T.B. has read another sheet. now not much. don't like weight  
and diet but of him. Sound of well swollen.

Healthy looking man, good color, well nourished W. about 12.1. Pulse regular,  
good volume. Arteries not sclerotic. Chest is well formed. A little flabby  
enlargement of sternal posterior triangle more on left than right. Breasts are  
equal, no depression. Tiding of veins in line of diaphragm. Chest is large,  
rather barrel shaped. Sternal slight. Measurement right 19 1/4, expansion under  
in inch. Left 17 1/2, expansion about 3 1/4 in. Apical beat not visible;  
no pulsation in cardiac area or to the right of the sternum.  
Flatness above left clavicle. Impaired resonance to the 2nd rib, in fact  
all the way down left side is less clear than on right. Above  
clavicle g.b. Breath sounds scarcely audible. Below is an expiration  
of equal length breath tubular; a few slight crackles of inspiration;  
under towards the sternum; intensified by deep breathing & cough.  
Expiration has quite emphatic to the right upper lobe in part g.b.  
Breath sounds normal, relative intensity, a few crackles over the sternum.  
Behind striking difference between the two lungs in quiet. Behind  
to the left. Murmur feeble over the sternum base. Expiration scarcely  
audible. numerous crackles over apex.  
In recumbent posture no definite w.b. visible nor palp. Absolute cardiac flatness right sternal  
border, nipple line, top of 4th rib, over land over left half of front of chest.  
Liver edge is to be felt just 2 p.b. below costal border. Spleen not enlarged.

Tuberculosis  
had

XII-12-04

~~84~~ 84 7622 Park ave

Told her that in lungs, - cough it was  
5 w. ago slight haem. - bk up 1/2 liter - ad med.  
stopped before or 5d there. In usual health. had had  
cough 10 dgs. 14 yrs ago. Coughed slightly in the am  
for several years. No calcareous sediments. - 4 & ago  
had a colitis several dgs. - v. h. w. m.  
7 h. 7 d. - in - 1/2 S<sub>2</sub> The other was anti  
bright - 7 or 8 mos. - use v. a potato skin suffered then  
had tuber. got better. ~~For~~ Has had it 18 mos. - has been  
anxious many years.  
after the exam. - said was right in fact. - had been in the  
lungs - gained some in weight. - 5 mos. - were healthy.  
the been close confined in the am. - had  
unpleasant. - the been close confined in the am. - had  
unpleasant. - the been close confined in the am. - had  
unpleasant. - the been close confined in the am. - had

Notice reddish color. Torus is a can. Loss muscu-  
lature; weight 135. Pulse is 100. Regular. Chest is well formed;  
anterior 20; posterior 20. The right side of the chest is approx-  
imately 18; left 16 7/8; apices at right ribs at level and same - gray; left about the same. A. S. is small - 1/2 liter. - 1/2 liter.  
distances between the apices. Perhaps the right pleural stands out a

little more prominently than the left. Percussion is clear in front. Breath sounds are very quiet on both sides in front; rather suppressed and distant on the right. On full breath the air enters everywhere. No rales on coughing. Slight crepitation at left apex behind. An occasional crackling rale. No flatness anywhere. No special difference in the fremitus on the two sides. Heart's action is clear. Spleen is not enlarged. Liver not enlarged. No enlargement of the glands.



There are other sites. A little higher attached note at the right  
apex: excels above the eternal word. Clear at the left apex.  
At what apex is found the happy words are loudly pronounced.  
Excelsior is pronounced. A few speaking notes, not especially  
loud, but heard above the eternal word of the 4th site.  
There are three or four breaths after the word "excelsior".  
After, speaking, not resonant, and the breathing is not cavernous.  
On coming to the 5th are distinctly speaking and better situated  
resonant. Higher than the speech of the 4th and the speech-  
less. Clear in the future on both sides. It is the speech of a  
p.

October 20, 1906

E. J. S. - Sputum Exam<sup>n</sup>

I. Macroscopic Examination

Thick tenacious distinctly blood-stained mucus.  
No special odor.

II. Microscopic Exam<sup>n</sup>

1. Fresh Specimen - numerous red & pus cells.

No elastic tissue found.

2. Stained Specimen a fair number of

tubercle bacilli found.

N. B.

Character of specimen entirely different  
from that previously examined, and which  
contained no tubercle bacilli.

J. B. Fulcher

Dr. Osler

Dear Sir,

I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the case of the patient named above.

I have examined the patient and find him to be suffering from a case of the disease named above.

I have also examined the patient and find him to be suffering from a case of the disease named above.

I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the case of the patient named above.

I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the case of the patient named above.

*Tuber ulvae bulbosum*

Nov 8th. 07

St. Pierre

Lung.

~~92~~ <sup>66</sup> Lung mass

90. good const. for well. catarrh. in March like  
most Irish men. Vile weather & anxiety - about work - at head of school  
ran me down & 2 snow storms in April. Compl. April. & Dr said ancient  
pneumonia had been "sarcoid". Spas cough. in Aug. catarrh. & said all  
clean but that cough would be perhaps cure Staph & Staph. Had  
this summer. Work nervous here. everything cured & - 10 years later  
never. 90 better in summer gained flesh. walked & in May went  
to give in Clark Tatum at Cambridge Eng. & Paris. 90. Then away  
the vapors. Started Oct. 15. Strength good & cough slight. Vile weather  
May Oct 25. & saw a gey & saw a cold. but only going catarrh &  
not this week & ancient was come back & reduction of spas cough  
when comes in when & cold or deep is anything at all. Every time  
given 2 leders. warm & as with as long as in values of the 18th century  
no success. & result is short. - Did pick up but not quite to  
normal weight. No fever. Spas - up nervous not much. for  
home ten brought up mine. On am nerve. - this for years. No hard  
const. - Did not get well as was completely.  
Malum at 2 in the Pacific March. but had a cross series

1 dyspnoea

2 Pale.

3 pulse not very rapid

4. Constipated of left side tube. - flat - not skodan

5. Hoarse breathing a rales. very resonant to 5th rib. about covers but  
not. pseudo-cura

6. At apex also tub. a few rales also resonant.

7.

Tub. Pleurisy

Sept 6th '09

Dr Chatterton

Mozaffarpore

10 Ever, with Pleurisy & towards.

~~10 Ever, with Pleurisy & towards.~~  
D. T. Amurhi, Bengal

In India 28th. Illness. mod. fever 1st in '85. severe attack came home. ill for  
M & on 6 mos. & 1 well. never again. Dyenter 3 1/2 years <sup>ago</sup> acute attack last  
of same type 12. D. much blood & mucus. S. I was & came home. 4 mos. then  
well. P. 2 fever M & on 6 or 8 mos. began one of T. in Dec. 6 10 20 - '85.  
nothing but the fever. but felt ill. Took for 11. 7. to 9. 6. was to 8 51 - was  
well in June. began went into camp all May. had fever then but not ill.  
date went to Simla for - no. no prod. went to Mozaffarpore & and  
under treatment. S. I was not changed. in house He said that also of liver the  
note said no. Besides. pleurisy - not any. S. I was 3 years. cough  
with it of a warm day 11 night. when fever began pleurisy 3 1/2 yrs. had  
some fever. Down in chest. Cough for any time in any of the pleurisy.  
some of it - not more. still not very little Sputum nothing in it  
the cough well to adv. Fever for 29th. good appetite.

Good colour. Tongue clean. Pupils equal, re-act to light.  
No anemia. Pulse regular, a little rapid 96 in sitting posture.  
Chest is long, thin. Spaces well shown, equal on both sides.  
Expansion a little less on right than on left side.  
Lower right spaces a little less distinct, heticular, the  
8th + 9th in middle line. No tenderness on pressure on either  
side of the chest. On the right side clear along the  
sternal margin. Flatness begun just below 3rd rib in middle  
line extends out into the axilla. Upper part of

liver flatness is on both sides, lower border.

From behind both sides look equal, right perhaps a little fuller than left. Intercostals are well shown.

Percussion is clear behind. until one reaches the outer border of shoulder blade, then flatness extends into the axilla.

Air enters well freely into the base of the right lung.

In the axilla outside the right nipple there is a

well marked friction, after coughing a few well marked crackling rales. Heart sounds are clear. Apex in base.

Abdomen is flat, natural looking. Spleen not enlarged.

Liver edge just felt. 2 fingers breadth below costal border.

Glands not enlarged.

Cyrcura. Tachycardia  
Ochromis.

1. 16. 93

~~2. 16. 93~~ 57. Salisbury Md.

7. 14. 82. 7. 22. In 74 & 75. all nervous & high strung.  
always well except nervous. 20 y. ago spinal trouble -  
wore a brace. Not for 10 years. <sup>has</sup> active & vigorous. But not  
same in eff. Suffer in times - cannot take exercise.  
Sugar 2 years ago. <sup>was in 1882</sup> 2 1/2 p.c. Last summer went to Catehag.  
only a trace then (7. 18. 90). Broke down then 1 mi  
year. (2nd out, nervous, attacks. Had intermitting pulse  
action. - home in Nov. slight transient. 5 or 6 last  
nervous & indigestion - whole left side - & then on left  
shoulder. In 92. carbuncles - mostly. No scars in  
left. Suffer often. - for years. Mother & mother's rheumatism  
never passed away from me.

... with looking man color good - no  
anaemia tongue clean a patch of pig-  
mentation on the inner side of the  
right conjunctiva. Pulse rapid 116 - low  
tension - vessel not sclerotic - easily com-  
pressible. No. 1. 18. 90. present.  
Spleen is not enlarged - no throbbing in cer-  
ical vessel - or in internal notch. New

dry scaly patches like psoriasis on trunk;  
Apex beat not visible - not palpable - slight pul-  
sation in lower sternum. Percussion on man-  
brum clear upper limit of cardiac dulness  
about 4th does not extend beyond mid sternal  
line and just within nipple. On auscultation  
both sounds audible at apex - soft faint with first  
heard along anterior axillary fold - well heard  
in lower sternum. At aortic, aortic valve and over  
aortic arch it is well heard - not rough - propa-  
gated into vessels of the neck - second sound is  
clear - not accentuated - no tracheal tugging.  
Heart sounds are transmitted to the back - the  
first is not heard. They are loud in the left infra scap-  
ular region. Respiratory sounds are clear.

Abdomen - Scar of a carbuncle just at left of navel - edge of  
liver readily palpable below costal margin - Spleen not  
palpable - no tenderness over pancreas on deep pressure. Sw-  
f. of liver & liver dulness diminished. Neither H. duod-  
f. palpable - no pain on pressure over the renal region. Out-  
line of the discs a little obscure on left side. no retinitis. The  
t. head, signs are on both eyes - on both sides of the cornea -  
on vertically, beginning about 2 mm. from the

edge ~~of~~ and extension. About 5 mm. in the transverse - and a little more in the vertical direction. Those in the sclerotic are ~~p~~ blackish brown in color - the inner ones are the most extensive. About the one on the inner aspect of the left eye and the outer one on the right - are a few little yellowish fatty bodies. The pupils are of medium size and react to light and on accommodation.

No alb.

Order T. 2 mm.

Jan 14, 95: P am side continues - negative on exam

to the middle eye

What is the result of exam.

Jan 6th 95; Pulse 120; otherwise condition is good.

10. 16. 95: Home, very severe high carbon. Sugar in last urine trace  
Hem. stain on reds, does not weight 6 or 700 fig. in 1000 mm.  
low sugar.

Oct. 24-1901. Pulse 120, practically the same as it was in 1895. apex bruit is louder—a little more intense. General condition is good. Within the past ten years a remarkable pigmentation ~~at~~ has developed over the sublar regions on both sides, and the pigmentation on the inner surfaces of the ears has increased extraordinarily. No increase in the pigmentation of the conjunctivae. It is a pigmentation that is black—not brown—so that it looks like the black of black-heads—but it is in the skin.

Oct. 15th, 1903. Pulse, full pulse, quite regular. A. B. in fifth, not specially forcible. No palpation over manubrium, visible or palpable. Heave, very systolic at apex. Aortic second is clear. The systolic is propagated into vessels of neck. No pulsation above the sternum. Marked throbbing in both subclavians.

Dec. 4th, 1902. The pulse is much more regular, only an occasional drop; very good volume. The a. v. is not visible, not palpable. Systolic thrill just at the aortic base. The aortic regurgitant murmur at apex and second left costal space, well heard at aortic regurgitant and transmitted into the vessels of the neck, very loud, no murmur elsewhere; no murmur at base of heart. A little more stiffness of the joints.

X. 91.04. For a few very good condition. Rec. of phth. of  
breath. heart exam. over of the heart exam. very comp.  
Pulmonary sp. & aortic. has been all well since left hospital.  
This

The pulse is regular and full; the beats are large, but the irregularity has disappeared entirely. The color of the lips is good; color of the finger nails good. The hands and fingers are distinctly more stiff. A. v. not visible, not palpable. The aortic regurgitant murmur at a. and 2. lower sound is clear. No signs of enlargement of the heart. The systolic murmur is not exaggerated.

into the vessels of the neck; heard loudly over manubrium. There  
is no pulsation in the second right. The aortic valves close  
clearly. No flatness over manubrium. No flatness outside the m. l.

1401 LOCUST STREET  
PHILADELPHIA

January 18, 1895.

Dear Dr. Osler:

The condition which you describe in your note is usually called melanosis sclerae. It is sometimes symmetrical, sometimes not, and I think more frequent in the upper portion of the sclera than in the region which you describe. It is a congenital fault almost always, I think, although somewhat similar patches occur after one or two of the inflammations which attack the anterior portion of the uveal tract. If it is congenital, it is due to a process which I believe the Germans describe as "natur-spielen." You will find a very good account of the condition in Graefe und Saemisch's Handbuch der Augenheilkunde, Vol. II, p. 117, a somewhat poor account in Picque's Anomalies de Developpement et Maladies congenitales du Globe de l'Oeil, p. 168, and also a modest reference to the same in that epitome of wisdom which the child of Satan has purloined from your office. A copy of the latter<sup>\*</sup> is now speeding its way so that the jewel may be restored to its crown.

Yours sincerely,



Dr. William Osler,

1 West Franklin Street,

Baltimore, Md.

*\* The spirit, not the child of Satan*

# THE JOHNS HOPKINS HOSPITAL,

NORTH BROADWAY.

HENRY M. HURD, M. D.

Superintendent.

Baltimore, November 10 1896


## Analysis of Urine.

The urine has a distinct yellowish or dark brown smoky color, with a slight hazy white precipitate; no special odor to be noted; reaction is markedly acid; Spec. Grav 1025.

The urine on standing has deepened in color.

### Chemical Examination -

Urine contains a very faint trace of albumin.

Fehling's Copper solution is reduced in a peculiar manner. It is first turned an ink-black color and on further heating a reddish-yellow precipitate is thrown down. The urine is optically inactive and does not yield  $\text{CO}_2$  with the fermentation test. Negative also for sugar with the phenylhydrazine and bismuth tests. No diazo reaction. On the addition of  $\text{KOH}$  solution the urine becomes a deep brownish-green color on standing, this color extending gradually down through the column of urine.

### Microscopic Exam<sup>n</sup> -

Few hyaline and finely granular casts; cylindroids; squamous epithelial cells and an occasional pus cell. Few oxalate of lime crystals.

N.B. - Amr. endeavouring to isolate the crystals of the homogentisin acid.

W. B. Fitcher

# Nervous Palpitation

1. 5. 2

~~Palpitations~~ - up. hill goes. 112 a hour  
by down road - 110 a hour. Pulbit letter  
us. <sup>6-7</sup> year ago. Only not. p. 20. 3 year  
ago had some nervousness in chest. Had gyphe  
no cough. - had some an. 7 year ago. Noisy phlegm  
strong as rule - same as 10 lbs in weight in year.  
a. 100 lbs. Excess moderate as by. not in cases

Heart this looking - tongue is clean - no throbbing  
in superficial vessels. Pulse 92 in  
standing posture - no thickening of the  
vessels. Apex beat visible in fifth inside  
riple line - not leaving - thrill - no  
increase in superficial area of dulness.  
no murmur - no throbbing - no  
apex in the area. It is sharp - neurotic.  
recumbent - heart sounds clear - occasional  
intermission. <sup>lets diagnosis</sup> Personal  
abdomen a little relaxed - tympanitic - throat -

10.29.98

Post- op.

in the bed of } 2 years.

4. 10. 1

~~Gettysburg, Pa.~~

Complains of heart trouble.

Cripple from right

leg

leg

leg

leg

leg

leg

leg

leg

leg

leg

Looks very well - well nourished - walks with a limp - leg is straight - but knee flexed. Pulse is 92, medium tension - medium volume - not collapsing - easily compressed. Apex beat not visible - not palpable - diffuse impulse in fifth. Sounds are clear at apex and at lower sternum and at aortic cartilage. First sound only





The ... ..

10-23. Beller - gained 18 lbs in summer

To 80 + to Harry Thum...

7. 9. 96. Took Typhoid pellets on my stomach.  
No change from 1st.

Circumference above 22., middle 30., below 36.6.

Drugs none. very Belladonna  $\frac{1}{2}$  XXX + 1 c.c.  
nearly all winter.

Used sulpho fast soda on xx.





eyes and ears see Dr. Randolph's  
notes. Hearing is pretty good  
for the watch in the right ear.

Heart sounds are clear - no  
accentuation of the aortic sec-  
ond. A

No dilatation of stomach - liver  
is not enlarged. Spleen not en-  
larged - Knee jerks are feeble.

~~eyes and ears~~







Nov. 25-16 Better at times. Still curious feelings  
in shorts, no so much dread & apprehen-  
sion. nervous.

... sunny ... ordered my X ...

3.25.97 Well last winter. - good spirit - & well - but nervous in  
cars. In sp. not so well. In West a night. after back  
a week more & in July, away for 2 weeks. all night in 2 days  
In Nov. worse than ever. 2 weeks for 3 weeks. not back a day  
before bad. Occas. well but many in cars. Depressed & blue  
scared feeling, spleen at night. Colic not so violent but lasted  
longer. 10". Real fear. like "bag of sea sickness with not the  
nausea. What afraid of it kind of gutta serena. Feels sometimes  
as if he was too well. Sleep well, Colon good. - at work.  
"Self a girl to marry"

# Henrich's Purpura.

10.14.95

ultr

~~Henrich's Purpura~~ 27. Henrich's Purpura.

Sample of old salt water 2 or 3 days running in  
the water in a jar & in the water in a jar the  
water, more & more water, & the water in the jar  
water & the water in the jar.

2nd. All the water in the jar, & the water in the jar  
the water in the jar.

3rd. All the water in the jar, & the water in the jar  
the water in the jar.

4th. All the water in the jar, & the water in the jar  
the water in the jar.

5th. All the water in the jar, & the water in the jar  
the water in the jar.

6th. All the water in the jar, & the water in the jar  
the water in the jar.

Sometimes as by a palm of hand. None for 1 1/2 or 2 years  
never not on leg. Sometimes dark brown - never  
white.  
no pains in joints - no swelling  
in the family like it.

Medium sized man - looks pretty  
healthy - perhaps a little pale - Tongue  
clean - gums not swollen. Pulse is quiet.  
Examination of heart and lungs nega-  
tive.

The abdomen looks natural - is not  
swollen. On deep inspiration the edge  
of the spleen is distinctly palpable -  
area of vertical dulness five fingers  
breadth. Stomach is not enlarged -

Liver normal - no increase in size.  
No spots now on the skin - no oedema -  
no swelling of the legs - no swelling of  
the joints.

Pairs in chest - of doubtful character -

12.12.95

~~2/11/95~~ 47. Wilmington Del. (from Dr. Hensen)

Compl. of lungs - pairs in shoulders & sides & lower  
part of hip - thro' the breast - hip & neck.  
dilated - since last February. Began acutely - but cannot  
fix the date - first pain thro' the chest bone & the  
right side. Pains were in early am of the day & would  
keep awake. So bad the perspiration. Pale & cold  
at times - feet & coming up in face. Pallid at heart  
with it. Pain never especially at heart. Pain always  
same nature - jumps about - side to the other. Slight  
pairs in chest - even jump with it.

Loss in weight not much except in old. 109 now  
159. Lower abd much united. Today 160. Not having  
appet. good. no nausea no vomiting. No cough. Sleep  
usually. without. Glands indigestion - old -  
since 1882. Vol of Kelsch - much pain in passing pain  
in stomach. 1882 3 had it for - pain reduced to  
5 Kelsch. In the night 2 3 am got up & lay in bed until  
9 am, pain in stomach & bowels. Pains little well  
after well in 800. well no jaundice. - all gone but the left  
one & again yellowing

P.B. Well nourished man - grey hair -  
Panniculus is everywhere well preserved.  
Pupils are equal - complexion a little  
pallid - color of ears good - color of lips  
pretty good. Tongue is clean - mucous  
membranes of mouth good color. The  
neck is unusually broad at the base -  
clavicles not noticeable - supra-cla-  
vicular spaces look full - broad on  
left side. Supra sternal notch is full.  
This fulness is largely due to the fat.  
Perhaps the lateral processes and tis-  
sues in the neighborhood are also a little  
prominent - no distinct individual  
glands are felt. No prominences on chest  
or on mammaries - no pulsation.  
Apex beat faintly visible just below nup-  
ple. Draws a deep breath without pain.  
pretty equal - ~~left~~ right side perhaps  
a little ~~less~~ more than left. Breath

sounds are equal at both apices @ in front - a little distant and muffled on quiet breathing - not very full and clear on deep inspiration - no adventitious sounds. They are well heard in mammary region.

Heart sounds are clear at both apex and base - no specially transmitted to axilla (?) - first sound is well heard at manubrium.

There is no tracheal tugging. Expansion good behind - at left base a little flatter.

The seventh cervical looks very prominent and broad - no tenderness - no dulness behind. Crackling - perhaps pleural - rales at the left base behind. Tactile fremitus is well felt on both sides. The pleural sounds extend around the heart. The abdomen

20.22.

is natural looking - soft. The  
gall-bladder is not palpable.  
Examination of the abdomen  
negative - examination of  
rectum negative. no enlarged  
glands - no epididymitis.

Ordered the iodide of potassium

12.7.98. S.A. very well until. Pains in & of. not  
worse. It cannot stand it - recently down a & side -  
the same pain given. S.A. started 179. At the time of the  
day.  
The same pain given. S.A. started 179. At the time of the  
day.  
The same pain given. S.A. started 179. At the time of the  
day.

*Arthritis deformans*

3.62.26

~~\_\_\_\_\_~~ 5 2 5 2 1 2 5 4 9.

changed.      22 1 h.      no ch. a.

7. How does the *explanans* explain the *explanandum*?  
How is the *explanans* related to the *explanandum*?

3. The first part of the paper is devoted to a study of the properties of the function  $f(x)$  which is defined by the equation  $f(x) = \int_0^x f(t) dt$ . It is shown that  $f(x)$  is a continuous function and that it satisfies the differential equation  $f'(x) = f(x)$ . The second part of the paper is devoted to a study of the properties of the function  $g(x)$  which is defined by the equation  $g(x) = \int_0^x g(t) dt$ . It is shown that  $g(x)$  is a continuous function and that it satisfies the differential equation  $g'(x) = g(x)$ .

not red. 1 knee - rt. h. . both shoulders. cannot get across  
the back of the neck. turns around. ( ) . and my

also met. and put up. with a little more money,  
and was able to get a good night's sleep.

1. The first part of the paper is devoted to a general discussion of the problem of the existence of a solution of the system of equations (1) for arbitrary values of the parameters  $\alpha$  and  $\beta$ . It is shown that the system has a solution for arbitrary values of the parameters  $\alpha$  and  $\beta$  if and only if the condition  $\alpha + \beta = 1$  is satisfied.

(1) The first part of the paper is devoted to a discussion of the
 various methods of determining the rate of reaction. The
 results of these experiments are given in Table I.

at the end of the road, the house is very old and the garden is very large. The house is very old and the garden is very large. The house is very old and the garden is very large.

damp weather. Was nearly 'home'

30

very much lower. my "red" ultraviolet.



Cancer of stomach - severe anaemia -  
Remarkable double murmur just  
above apex.

June 6th - 1896.

~~James [unclear] 64. 18 E Linnole St. in Baden~~  
Couple of indig. dyspep... when eat distress  
would stop it up - vomels got to make a terrible  
noise, and enough to be heard across the room. Retained  
eat in May 1st. Pale since 3 or 4 weeks -  
Is a dyspeptic. In 871 2 1/2 lb. reduced to 08 lb. pale  
then. - no event. at business ever since. Had hem of  
bladder for much to Oct-12-9. ago. No nausea  
lost in weight 5- or 6 lbs. 120 now. 2 months ago  
115. 125 is ord. weight. Vomiting after food.  
In abd. in or out. Not much gas come up.

Looks a little pale - not very thin - fairly  
good musculature. Face has a yellow  
pigment - marked on the neck - Tongue  
is clean - Anaemia is quite marked.  
on conjunctiva and on face. Pulse is  
full - tension good - forcible pulsation  
in the peripheral vessels - rather sugges-  
tive of collapsing pulse. Marked oedema  
of the legs - skin thin and glossy. Throb-  
bing in vessels of neck and in sternal

notch. Apex beat not distinctly visible.  
Visible pulsation in superficial mammary artery - Mammillum is clear. Systolic murmur at apex - not very loud. Soft systolic at aortic region - second is clear. Below the fourth rib a well marked double murmur on left side. systolic soft - diastolic quite distinct. Heard also at the apex - is not heard at pulmonary region or at aortic region or down the mid-sternum.

Abdomen is full - natural looking. On inspection a distinct tumor in the left half of epigastric - extending into the left upper quadrant of umbilical region. It descends with respiration and becomes much more distinct. It has an excursion of at least two or three fingers breadth. At intervals it becomes more prominent - particu-

larly just to the left of the navel.  
The throbbing of the aorta is com-  
municated to it. On palpation  
in the parasternal line about two  
fingers breadth from costal mar-  
gin - there is a nodular body - a little  
tender on pressure - and it is that  
which one can see moving up and  
down with respiration! To the right  
and on a level with the navel there  
is a second nodular body - not near-  
ly so distinct - not so large. No en-  
largement of the glands in the groin  
or in the neck. Spleen is not enlarged.  
Liver is not enlarged. Well marked  
Litten's phenomenon. Intumescence of the  
abdomen - deep seated feeling as though  
the glands were enlarged.

Best of all I ever experienced.

# Scleroderma

5. 15. 96

Rev ~~Dr. H. H. H.~~ 49, Savannah Ga. Dr. Charleston.  
 7 ft. 8 in. 7. d. at 73. m. l. & well. B. & S. w. d. 1.  
 Graph. in Oct. 95: back. w. out. & hand 1-  
 keep up. Rheum. muscular. felt for a month. Shaking  
 from a then in st. foot & ankle. acute ash. hand up  
 several weeks - yellowing under c. d. & h. l. Cornel. f  
 st. weakness & muscle f. got up & move a bit. feet swelling  
 & that of heart. d. after pt. of Jane he went to Kings. - slow  
 got well of R. but general trend did not. This spring  
 was better - now in winter - at times better at times  
 more. Still of hand & shortness of breath. prostration &  
 weakness; swelling of feet. In army with malaria much.  
 P.H. well & st. not robust as bz. good health, no remem-  
 ber typh. pneumonia at 13. very severe. He was on 175  
 to 138. Has been a pretty heavy drinker - has  
 been free eater.

no pain in legs now. no marked symptoms. no pain  
 in hands. never had GP. before out.

Face looks natural - lines on the forehead  
 show well. Scleroid induration on fore-  
 head attached to periosteum - nodule the

size of a pea - where he had a bit of brick  
lodged. This has undoubtedly grown larger.  
Lines about the eyes show well. Naso-labial  
fold plainly seen. No tophi. Skin of cheeks feels  
a little parchment-like, - particularly just  
above the naso-labial fold. No trophic  
changes in the hair - skin of neck is  
natural. Skin of chest becomes very hy-  
peræmic on exposure - no thickening  
or induration of the skin of trunk.

Arm - no involvement of the upper arm -  
skin perfectly natural. Forearms look  
normal - from about half way down they  
are decidedly hide-bound. The hands are  
congested - no other trophic changes.  
Skin of the back of the hand picked  
up with difficulty. Skin of the fingers  
is entirely hide-bound - cannot be picked  
up. <sup>They</sup> ~~and~~ feel very firm and cold - and as  
he expresses it - "like sticks". He cannot ~~make~~ make  
a fist with difficulty - imperfectly - cannot

flex the terminal phalanges - can flex the middle phalangeal joints at a right angle. The fingers are cold - hands are moist. The pads of the fingers are very firm - skin a little shiny. Palms of the hands are hard and quite indurated - ~~no~~ stiffness in the joints of the arms at all.

Legs - no involvement of the skin of the upper or lower legs. When he stands up there is a most marked congestion - extending well above the knees. This the doctor says has been specially noticeable in the morning - the feet become very purple. The ankles look a little swollen - and marked with the shoe in several places - pits half way up the legs. After standing for a few minutes the foot becomes quite purple ~~at~~ - venous

congestion is extreme. Big toe joints not specially swollen - not specially tender. No tophi in ears.

Apex beat is felt in fifth - no enlargement of heart. Action is a little rapid - in the erect posture is 138. There is a soft murmur at apex - probably due to the rapid action. At base sounds are clear. No pigmentation of skin.

Sept. 17th '91. The fingers look scarcely as purplish as they did - and I think are scarcely so cold. Otherwise there is no essential change. The nails are all heavily ridged horizontally and the ridges beaded. The

erythema extends up the arms - no special change in the face. Complaints somewhat of a little numbness on the left side of the mouth and on the upper and lower lips and along the left cheek as far as the lobe of the ear. The naso-labial fold is a little stiff - as it was at the first examination. There is no special change in the skin of the trunk. The feet are very livid and cold - skin about the ankles and feet feels a little indurated. Certainly as he ~~stands up~~ sits down there is less congestion about the legs.

Mr. ~~Smith~~ has had a fairly good

summer. The pulse rate has been  
from 92 to 108 average of 95 or 96.  
There has been no palpitation of  
the heart except for a week - when  
he stopped the Digitalis mixture.  
He took the thyroid extract faith-  
fully until about a month ago. He  
is stronger, able to get about better,  
and the color of his face is better.  
His present weight is 135 pounds - the  
same as when he came to Baltimore.  
He ran down to 131 pounds - but  
has gained again.

May 13th, 1905. He looks remarkably well; the color is good; the fa-  
cial expression is very natural. While the face looks a little

smooth, it can be wrinkled easily and the skin does not feel at all sclerotic. The ears are not affected. Practically now no involvement of the face at all. The hands still look a little congested. He has very much more use of the hands; formerly he could not more than partially flex the fingers; now he can make a fist; they are always cold; not always blue. He still uses the hands a little clumsily. The hands feel moist and cold; they look a little blue; the skin is a little stippled like a washer-woman's hands; can extend the fingers almost completely. The skin on the backs of the hands is soft; the skin over the fingers is firm and indurated, but not nearly so much as formerly. No involvement now of the skin of the trunk; a good many dilated venules. A. b. is not visible, not palpable. Heart's action is rapid, an occasional drop. The legs are wonderfully better. There is no redness. The vaso-motor condition has entirely disappeared. Practically no sclerosis of the skin of the legs. He took the thyroid for at least a year. The left ear, which was involved, and the left side of the cheek, took nearly three years to soften; the skin is now perfectly pliable.

Jan. 25th, 1906. He has still a little lividity in the hands and feet; hands still get blue. The most striking change is in the face. The ears are now soft and flexible. The face looks natural, perhaps a little smooth; still no crow's feet. The skin can everywhere be picked up, and there is no single spot presenting any actual scleroderma. There is a most remarkable change in the hands. He can now make a fist. The skin can everywhere be picked up. It has lost its elasticity; the pinched fold takes a considerable time to disappear. He can flex the terminal phalanges. The skin can be picked up on the

back of the proximal phalanges, and raised in folds on the others.  
Feet still get livid; has gained in weight. Is wonderfully better.

mon - crural neurasthenia.

Oct. 22, 96

~~Calverton, N.C.~~ Calverton, N.C. 37. Dr. J. H. Hays and  
Dr. J. H. Hays.  
Period of leg atrophy - & numbness.

Four years ago a numbness in middle of right leg -  
on up one up to knee - only when walk - same  
thing seems to run in the stomach - numbness - after with  
reflex. Proliferation of heart. Leg got red & hot - but  
does not come with the numbness. On all sides the ear  
hears man. Has no ridge - never heard the word ridge.  
in cold weather. Worked too hard.

On one month's time - numbness - & reflex is gone.  
For 14 years now hardly been able to walk on account  
of the stomach. - & reflex is gone.

Time now, working man. Nothing evident in the  
foot - sens. perfect - leg is very much re-appealed  
no pain in walk.

Leg is very interesting. After he walks for a couple  
of blocks it will stop him short - indescribable feelings -  
numbness - as though asleep - could not go on - if keeps  
on, an uncontrollable desire to stop. If he rests it will  
pass away. At same time a feeling of burning and con-  
traction in stomach - sickish feeling - and a sense -

tion up back as though the pain was rising.

Look pretty well - pupil reflexes are good.  
Apex beat is within nipple line - not forcible -  
no increase in the area of dulness. Heart  
sounds are clear at apex. first is a little  
short and nervous - no accentuation of the  
aortic second. Stomach is a little re-  
laxed - no clapotage.

∴ Cerebral tumor or hysteria - which (?)

9. 19. 96

~~Mr. H. G. ...~~ 38. 2014 Bolton.

M. 15.7. 2 ch. 1 musc. 3 mus.

<sup>18</sup>  
~~6~~ mus ago woke up with vom. speed. no pain.  
no headache. just before between menstrual period.  
Some mus per week until 6 mus ago except pain in  
stomach - another vom speed. - first. no  
dizziness. a 3rd spell 3 months - every month. Last  
3 mus about menstrual period. I. Ix. ang. dizziness.

Has had 10 days a n. v. once. with headache first  
headache. - after vom. stained, grey, & at back of head. very  
severe, could pain little bit - has to lay down. always  
in back. I feel. severe pain to back of head.

Had a bad spell in street. Fine girl flushed  
& cold. Feels in legs as tho asleep. after the spell  
not lost in weight. <sup>both sides</sup> <sup>slightly</sup>

His 1st attack, pain in stomach. flushes & in April had  
papillitis, Holed. no vom. no headache. cupped & bleeds  
Before the attack his says head with about 4 yrs & face gets flushed.  
Headache never any - severe spell 2 or 3 hours - suffers. really just  
regard - 3 months 2 spells back at.

(over)

Looks very healthy and well - good color. Eyes are perhaps a little prominent - but that is natural. Perfect movements of the ocular muscles - all movements of facial muscles are perfect. Grip of the right hand 40 - of left 37. Stands well with the eyes closed. Knee jerks are distinctly increased - no ankle clonus. Very marked blurring of the outlines of the ~~pa~~ left papillae - particularly in the lower section - no swelling. Very marked blurring of the outlines of the right papillae - veins are large and full. Contrast between the two sides is quite striking. On direct illumination the right papillae looks very white - the inner quadrant most so - in hae -

morrhages. Hearing in the right ear is quite defective - can hear the watch at some distance less than in the other ear. Sensation is perfect. Heart sounds are clear. Pulse is a little rapid. Slight relaxation of the stomach. Nothing whatever abnormal to be felt. No enlargement of the liver - or spleen.

Throat looks quite natural.

11.25.96. Has been taking K.I. up to 80x44 (i.e. with great benefit. No venous all - since. & digests well.

# Preataxic Latex.

9.29.86

~~44. us N. ch. Eng.~~

Recurring attacks of pain last one yesterday.

In 3 days - Friday eve. began at night as usual. thought  
could stand it by hypodermic  $\frac{1}{4}$  gr. morphine - after next 1 bed.  
in 3 places. (a) under left thrust, (b) in front (c) lower right ankle.  
Gradually, usually can stand them by  $\frac{1}{4}$  of morphine. Bad night.  
Sharp pain & violence. at and stages of pain cuts up  
& clench the fists - unable about in bed in the attacks in those  
positions. Stuffed all that night - next day, Sunday  
night slept & improved. Monday again. In afternoon began to  
disappear. Pain would, die in the week & disappear in  
the other. ~~How much morphine took~~ On Saturday am.  
having taken as much as I thought safe. Doct. said  
save up of Hyocyanine. then another, told give morphine  
dose at 9 pm. of gr  $\frac{1}{2}$  in 20" another of gr  $\frac{1}{2}$ , &  
put morphine in pain. All asleep & slept all night.  
Never had it so long as this.

F.H. Parents died when I was young. no near. <sup>usual a</sup> ~~but~~ <sup>in</sup> ~~the~~  
near, inst. 1 B. d. of S. H. brain 52.

P.H. Really as org. I may say in '66 in '68 had 2g. in his  
several attacks - came. Was thoroughly treated, believe

Had 2nd. rather 6 mos. No Ex. pos. or hard ship.  
1st attempt of, went to the Pacific - Bel x 74<sup>70</sup> x 78 - say  
76' began to have the pains, thought they were rheumatic.  
In legs. no swelling, pains in deep part, sharp in case  
on side of foot or in heel in both sides, tho, not together, &  
down the sciatic nerve. 78-81 in course all attacks at times  
well. characterized. in bad ship took <sup>then</sup> Lancel read account  
of Galaxia - described the disease - in April '81 in '80. Passed  
a year with it in '92. on duty - Over in west abroad  
saw Eugene Dupuis - under his care - treated with  
fire. Charcot saw him, said takes - & treat. & springs  
of Lanceloux. in 50. off Fr. bath 21. Went to South in the  
Chilean boat - no pains for a year. Then came back.  
Better went to Lanceloux again. no effect. 3 weeks. Since  
then off & on, as a rule no more. 1.4 for. Lanceloux  
stop. ch. In '80 foot had it & in 16 years. The leg for does  
not lose its effect - no one can see it bring in - or have  
under the arm. Gets nervous, & excited, knows it is coming  
in - <sup>Pro</sup>

no ataxia - no visual troubles - a short time ago in  
reading. Sexual vigor unimpaired.  
Partly temperate -

The pains are always in the legs. For a long time chiefly in the  
inner aspect of left foot & along outer side of leg. but now in various  
parts. Occas. he has a little cringe in the left hand, when tired  
Stomach is good.

Is a healthy looking man - interior soft -  
no sclerosis - no increased tension.

Knee jerks gone - a trifle on reu-  
-prement. No disturbance of sensa-  
tions ~~on~~ affected ~~sides~~ regions. Very  
slight pupil reflex. Pupils of medium  
size. Slight difference in size - right  
is about  $3\frac{1}{2}$  - left not much more  
than  $2\frac{1}{2}$ . Discs look a little grey-  
vessels are not narrow. Strongest  
~~the~~ light does not produce very  
active contraction.

Breen - very.

10. 4. 86.

15 May.  
52 H. Lindquist.

~~He is a very young male Pa 50.~~

sh. gir. & a. thura. a y. ago had it & it  
went away. Now 5 or 6 weeks. old in head, cough  
very short & breath. Chrys fland crumpler. now very  
red. In am cough.

R as child. Typhoid f. 30 y. ago otherwise healthy  
bath clor., tired muscles a good deal. Moderate  
drinker - possibly too much.

Pulse 100. ~~normal~~, increased.  
u. b. ~~difficult~~ in 5-10. outside of the line. seemed clear  
a 2nd muscle accentuated. no gallbl. rhythm.

Liver enlarged. not much.

He is a very full bodied man eyes & face flushed.  
alb. heavy ring on ~~chest~~.

Order Nursing Pungs. Niemeysen hills.

Jan 10th 1897. Maria. looks well. Lost 20 lbs. was not taken over  
his 20 and that is walking. at same time. Sleep  
no swelling of feet.  
looks well all the blood work gone.

is in 5th in ref. and outside. p. 90. regular ~~and~~  
high. soft near at apex. curv. rug. grading 1st wh. &  
down stem, rhytche like a crawling snail not soft as a penny  
bruit ~~there~~ no dead like bruit. no great accent. 2nd  
does not enlarge.

Took 80 Meernegon aft. int. Took item again, this week  
appet. good - does not dull.

To table. Starch <sup>1/24</sup> & sorghum. N. v.  
L. Aorta.

12. 8. 28. Better for a year. good another. - did  
not need much med. could walk a mile. 20  
miles. Scales come a month. St. H. breast. Looks  
well - has lost somewhat in weight. Pulse  
is a little rapid particularly after exer-  
tion - regular - tension good. Cardiac  
impulse is forcible - in fifth - a little out-  
side the nipple - no murmur at apex.  
Sounds are clear at base. Aortic second  
is accentuated. Pulsation over man-  
brum. Flatness is marked. Pulsation  
is continuous with that of the heart.  
Slight tracheal tugging.

James Dine & Sclerodema.

3.23.97.

1116 Spruett Ave.

Emmitsburg Md.

Dropsy last fall. in sept. little got new.

In January for 5 weeks.

Sph. 10.5. ago bad attack. a little 20 throat. not much  
on skin have did not come out. Treated steadily for 5 years  
H3. & H2. For two years well. Oxychaps. badly. Well  
Solbre open 2 years ago who enlarges the eyes. eyes at the  
same time. Palpitation at same time & a little earlier  
died fall in hospital at St Paul for the dropsy. not all at  
not all well yet. Pulled up in Jan.

Brown comb. probably for the skin -

Fairly well nourished man - complexion a  
brown - marked exophthalmos, fully 2 mm. of  
the sclera exposed above and below cornea.  
Pupils of medium size, react to light. non-Herpes  
sign slightly marked - the descent of the lid  
does not keep pace with the descent of the eye -  
occasional retraction of the upper lid - at-  
most complete loss of the power of conver -

gence - Wrinkles the forehead slightly  
as he looks up. Fine tremor well marked.  
medium sized goitre - both lobes and  
middle affected - marked visible pul-  
sation. Thrill, particularly in upper  
region, very intense brist, systolic and  
strong, continuous hum at the sternal  
notch. Cardiac impulse is very wide vis-  
ible in second, third, fourth and fifth inter-  
spaces. Apex beat is seen in fifth outside  
middle line - felt also slightly in sixth.  
Both shocks well felt, marked third of the  
sounds at the base. Loud apex systolic,  
increases in intensity towards sternum -  
very intense in the pulmonary region.  
In the second left interspace, a distinct  
short systolic murmur, well heard when  
he draws a deep breath.

Legs are infiltrated, a little swollen,  
Remarkable pigmentation, <sup>appeared</sup> particular  
on the skin of the leg two years ago  
last fall, without , or without any

rash on the skin. It is a deep brown staining of great intensity. It extends close to the spine & the Tibiae. On the sides of the legs it does not reach so high. On the outer side of the leg it is just three inches from the head of the fibula. On the left leg it extends a little higher on the outer side, but the areas are very symmetrical. Behind it extends in an uneven border a little above the most prominent part of the calf. It shades insensibly into the normal skin. The color is very peculiar tan brown. It looks perfectly smooth. There are in places over it little whitish elevations scattered over the whole leg, much more marked on the outer aspects. One or two of these look like definite little fibroid nodules. There are very closely set over the skin, but only a few of them project beyond the surface. On palpation these brownish areas are leathery, firm, hard.

the skin can nowhere be picked up. Everywhere the line of demarcation between the normal and the infiltrated skin is quite well marked; One feels a distinct ridge - a slight discoloration of the skin beyond the most prominent part of this ridge. The scleroderma is limited accurately to a line just above the margin of the hoof-top. No coldness - nowhere pits - no cutaneous fibroid nodules.

Abdomen is full - large - edge of spleen is readily to be felt below the costal margin. Edge of the liver is normal. Knee jerks are a little exaggerated.

May 21st - 97. Thinks he has lost in weight, and has not been so well. Pulse has been more rapid and irregular. Has at the heart's action more, and has had more head-ache. Pulse now full - a little jerky - occasionally drops a beat, 120. No change in the exophthalmos.

mos. He perhaps looks a little paler.

Very marked throbbing in the neck.

Superficial veins over the thyroid and the external jugular are much dilated - both external jugulars are as big as large sized lead pencils. Venous pulsation in them as well as in the smaller veins. The whole gland throbs - in fact there is marked beating and heaving outside the nipple, live in fifth interspace and over the entire front of thorax. There is also a very localized impulse in the left sternal angle. Very prominent impulse in the right hypochondriac region, evidently pulsation of the liver - most pronounced between the right nipple and the tip of the tenth rib. Marked pulsation of the veins of the back of the hands. Capillary pulse in the wrist. Apex beat is diffuse in fifth and sixth interspaces - wavy. There is a loud systolic bruit =

loud ~~fruit~~ <sup>fruit</sup> at the base. is essential change  
in the sclero-derma on the legs.  
Brawny induration as at previous  
note. Over the tibia there is some  
oedema, pits a little.

Patient died on Aug. 8th '97.

Bath culture stone  
cholelithiasis

4.27.97

Wm ~~James~~ <sup>40</sup> P. Mgt. station alt co ra. (5 McIndoe)

Camp. of ent given. relieved - & convalesced  
1st attack 7 years ago. 12.5 ago went thru  
did no much - rough work. worked for 6 or 7 mos. pains  
& indig. & high fever. <sup>severe</sup> nausea. gave up work. Then  
had pentameter. in 85 said mesenteric very ill.  
In bed 17 weeks. 1st good belly worked in 2 or 3 years  
Liver camp began 88 or 89 ago. Heavy dull pain  
in <sup>back</sup> ~~back~~ of old ~~cholelithiasis~~ <sup>cholelithiasis</sup> at first. 1st attack of ~~fever~~ <sup>fever</sup>  
in 88 or 89. chills then & high fever, not regular.  
Health poor for years. married in '91. baby delicate. too  
jaundice & chronic & terrible itching <sup>after</sup> only. Omentum  
jaundice & even more. a year ago worked all of camp.  
after violent chill, & fever & sweat. after this  
all along for weeks every few weeks  
Bath chills sometimes w/ a chill. T. 103-105°  
Intense pain in liver. Still get yellow more  
in a month. Still - stools an clay colored.  
Has blue from bowel at times.  
"looks pale" & thin skin. has a  
brownish tinge - little icteroid. Lips  
are of good color. Pulse is good. Curious

staining of the skin. Abdomen is a little  
~~flat~~ swollen - right costal groove oblit-  
erated. Respiratory movements are nat-  
ural. Liver is ~~not~~ enlarged. Left lobe  
can be felt just a finger's breadth above  
the navel - right lobe does not extend  
so low not more than three finger's  
breadth from the costal margin -  
little tender - not so much as it was -  
surface is smooth - uniform. Edge  
of liver can be felt very distinctly - on  
bimanual palpation - lifting up from be-  
hind - feels like the edge of a spleen. There  
seems a very distinct notch or groove in  
the mammillary line which divides the right lobe  
from a tongue-like projection extending to the level  
of the anterior superior spine - this edge easily  
felt going considerably below the level of the navel  
and which, further over to the right, than is  
usual in the tongue-shaped depression, gall  
bladder is not palpable. Upper limit of liver  
dulness on the seventh. Edge of spleen is just  
palpable. Glands are not enlarged. Heart  
sounds are clear.

Epilepsy, not epilept. del -  
+ m. m.

B. 20. 97

~~John F. ...~~ 7. (J. 7. 3117th Washington St. <sup>in Fry</sup>

4th child. Healthy. not diff labour. quite well  
as baby. About 1 1/2 y ago began run over but not hurt.  
Wagon passed over, imagines that he came. 6 mos after  
1st attack - aph well. slight conv. more called, falling  
down frothing at mouth. lost consciousness. <sup>fellings all</sup> next in a few weeks  
11 mos ago very severe, one, after it he became delirious. 4 or  
5 hours. Dr put him under chloroform. Slept well next am  
feels a good deal. now as a conv. after that none for  
11 mos. Began again March 3rd. Pain in stomach  
over eaten - 4th convulsed. attack then. ran in  
March severe conv. April 15-16 severe. 3 hr.  
after he fell asleep after got out quite out of his mind  
day after cold. May 4th severe. June 10th. 3 hrs. vomiting. next  
day delirious saw things & shrieked. & saw terrible  
things for 4 nights. Shut himself when sick. Pains in  
legs at times. Dr. Wells says no signs in diet. more by diet.  
coughs since March 30. not a month better  
7. H. no new conv. in 6 months. He has such notoriety  
looks thin & pale, large eyes.

Expects, healthy. adenoids. & enlarged tonsils. no heart disease  
any.

R. Dr. & have adenoids removed

Dec. 13th. '95. Has had no severe attack -  
six weeks ago a very slight one. Has  
grown - looks well - good color. Has  
not had any screaming spells at  
night - no more night terrors.

# Syphilis - bone pain etc.

6.28.97

~~XXXXXXXXXX~~ 24 Ellicott City Md. Dec. E.

At Huntington W. V. Ohio - in a frog swamp.

in Europe as apparent. After several months back  
down completely. got home in it as ago - worse.

Pain in joints, shingles at hand swollen. Pain in chest. No  
swelling in joints. Has fallen off 18 lbs since leaving home  
in June. Quite well when went there. Had a child, was  
never out of maternal care and with general. But pain  
in the hips - not sharp - dull

P.H. After college a year left home. In Freshmen year <sup>1890</sup>.

Syphilis. Was so nervous Dr. Ede. Had a sore. Had a sore.  
Dinner had a sore in skin. Fought for 2 years. A half  
the yellow inlets for Dr. Ede. Otherwise very healthy.  
Very nervous.

He in 2nd metacarpal bone of left hand. Pain in it.  
dinner in 2nd metacarpal bone of left hand. Pain in it.  
No swelling in joints. No swelling in joints. No swelling in joints.

K. S. 80 X V. T. d. To walk for a month. Stop for  
2 weeks & then take again for another month. -

4.11.97 Better for 189-1890. Pain gone. Bottle gone. all right.  
11.2 again for 2 mos.

Part? Myxcedeme fruste. working numbers etc.

10. 257.97

35.08 Morgan M. St. Louis

[illegible]

... ..

Weight has increased in the last 3 or 4 mos. In May,

Now weight 500 gms.

An unusual degree of pallor - decided stiffness of the face - slight yellow tinge - very misoedematous suggestion. No great swelling beneath the eyes at present. The skin is very dry and harsh. Lips look a little blue. There are no gouty concretions on the ears. Slight commencement of Heberden's

nodes on the fingers - and a little fibroid thick-  
ening on the ulnar side of the second phalanx  
of the middle left finger. She rarely per-  
spires. Hands are a little cold. Tongue is  
clean. Pulse is quiet, regular. The thyroid  
is at any rate decidedly smaller than  
normal. She is now gaining in weight  
every month. Spleen is not enlarged.  
Liver not enlarged. Heart sounds are  
clear - no haemic murmur. Both  
lungs are clear - no changes in the  
retinae. Thyroid gland not to be seen.  
Neck is thin - trachea can be readily  
felt. - scarcely a trace of the thyroid the felt.  
<sup>the felt 20888 + many immediately, several inches a while to get into</sup>  
larynx is attached. ' ' - not so much to get into calculeum - grow  
th.

order a 7ness bottle of Fr. as a mix.  
+ 2 grs daily for 2 weeks of dry int. Stop the Fr.  
Nov 6th Begins the 2 bottle daily. Fr. better. a few  
bloated.

Clinical Laboratory - Johns Hopkins Hospital  
Oct. 26th - 1897.

Total Amount - 640 ccm.

Deep amber yellow color, clear, with a flocculent white precipitate.

Reaction - Faint acid      Sp. Gr - 1015.

Albumin - Very faint trace.

Sugar - None.

Diazo reaction - None

Urea - (Hypobromite method)

1cc = 0.012 grammes.

640cc = 7.680 " "

Uric acid - (Hopkins mod<sup>y</sup> of Fokker-Salkowski's method)

100cc = 0.0310 grammes.

640cc = 0.1984 " "

Microscopical Exam<sup>n</sup> - Very few medium sized hyaline  
+ finely gran<sup>ul</sup> casts - Quite numerous pus and squamous  
epithelial cells. Few cylindroids + oxalate of lime x'tals.  
+ uric acid

(over)

Jan. 6th -98. Patient has been at the Hot  
Springs for two months - and is a good  
deal better. Haemoglobin 62%. Has been taking  
4 grains of thyroid extract for two months -  
is to increase it to 5-grains in the day.

# Nervous Dyspepsia.

10.28.97

Mrs ~~XXXXXXXXXX~~<sup>35</sup> Birmingham Ala.

Cranp colic - 1st attack 5 or 6 - above navel  
indicated. Much acid. - Gas in small intestine, stopped  
in there severe attacks in the 2 years. Last 2 years  
back on 1000 lbs. 1 year ago no attacks at all  
operated until 3 weeks. - 1st attack. Trouble last  
year.

Swarmed out year, no relief. - Mrs. J. D. Mitchell  
7.4.97. 2.2.97 ago. General seepage. ending up down. None  
since. None since - belly did operate. Better at  
getting over again. Gained 10-15 lbs in 1 year.  
Exp. more marked out after 2 years. Now the nausea  
at operation - a feeling in man - collapse in  
nausea - gets weak & the, severe, runs off. -  
slight attacks with food. Much acid. -  
no jaundice after the attacks -

Swelling in the hand and the chest.  
Liver. - Edge of right lobe easily felt - no ten-  
terness - gall bladder cannot be felt. Pain on  
pressure increases as you cross the parasternal

line. The pain is very much more in the middle line just above navel. Spleen not palpable.

Stomach. - Upper limit of tympany on rth - extends low - two finger's breadth from the navel. Distinct soreness on deep pressure. The pylorus cannot be felt. After inflation stomach tympany extends to level of navel. Right kidney not to be felt.

Heart. - Apex beat is in normal position. Sounds are clear at apex and at base.

*Ancura spleen*

10. 29. 97

~~Rockford Ill.~~ 5-8. Rockford Ill.

C. of Spl. & spleen.

Mat. regim. Ch. & fever as child. At 7. . . . . 72  
had erysipelas bad. Had 7 all & left when aint well at 10.  
more since. Hard work in practice. Temperate.  
P. I. In winter 92-93 found T. 102.5 - & a dose or 2. . . . .  
a gun stops - did not feel well - Had the fever for 6 weeks.  
did not feel well - doubtful whether the smaller - after a most notable  
red & swollen & painful - only in a few days - was painful.  
noticed spleen enlargement - not very prominent. In 93 went to Fair  
in 94 noticed along with May 95 found was aneurysm &  
weak. Took times. In June not strong. In Aug. recommended  
sacchar with it. Last of 8 cases - in Jan. 90  
deceased. In the case. Gradually, aneurysm in Jan 90  
in fully well, walked & went some in Jan, went to work,  
and good, all work in 96. All anemia found with it,  
very aneurysm & rule. Then aneurysm & 2m, got adenoma & abd  
spleen. not so large as in 95. Took 2m, adenoma & spleen  
various. Had sh. med 4, 4000 000, & 5-1 00, 0

Looks a little pale - no extreme emaciations.  
Tongue is of good color. Pulse is of good volume.

superficial blood vessels, especially full.  
abdomen is large - hard & erect. There  
is no distinct prominence to the left of  
the heart - asc. descends with inspiration.  
A second mass descends just below the costal  
margin. In the first a distinct notch can  
be seen. On inspiration the notch is readily felt.  
The tumor is firm, hard - completely rounded. The  
lower margin is a little below transverse na-  
bel line. Others are singularly rounded & surface  
smooth - does not extend far back into the  
renal region. The other prominence, just to the  
right and above the navel is evident tho the colon is  
flatulent distension. The edge of the liver can  
just be felt two fingers breadth below costal  
margin. Enlarged line of enlargement. A  
small ecchymosis just to the left of the navel -  
on distension of the veins. Apex beat of heart is  
knocked up, just below the nipple. Sounds are  
clear. Boitic second a little snappy. One or two  
enlarged glands in the left side of the neck -  
one or two in the groin - no puffiness anywhere.

JOHNS HOPKINS UNIVERSITY,  
BALTIMORE.

Oct 28 '99

Dear Dr Osler -

The exam<sup>n</sup> of ~~the~~ blood  
is quite interesting

Fresh specimen - moderate poikilocytosis -  
slight increase in <sup>average</sup> size of reds - Few microcytes +  
macrocytes apparent diminution in no of leucocytes.  
no nucleated reds seen.

Blood Count

Reds -	4,788,000.
Leucocytes -	5,200
Haemoglobin -	60%

Stained specimen - Same poikilocytosis +  
variation in size as in fresh specimen - no nucleated  
reds seen.

Differential Count

Small monos -	52.0 %
Large mono? -	2.0 %
Transitionals -	4.8 %
Polymorphonuclears	40.0 %
Eosinophiles -	1.2 %

~~57. 97. 97~~

57. 97. 97. (2 patients)

Drained breast. T always high. Very weak  
 & cannot sleep 110 days. F. since Sept. 15th. Ailing  
 illness - some very. Last Spring peculiar. Scurvy in  
 hands & feet, worked hard in May & June. We all d.  
 In August severe diarrhoea - lasted 3 weeks. Sept 1st  
 no fever. In Aug not bad but no energy. Sept 15th.  
 Dr Evans symptoms. rashes, no diarrhoea since Aug  
 had some. In July & August - all at sea about  
 it. Thought cough - little - when in water in sea  
 took Terrene. Lost 8 lbs in weight. Suffered much, good  
 deal of perspiration at night. Dr Bartlett - looked throat  
 The hoarseness now is from last Tuesday. <sup>diffic</sup> cough now

F. H. M. L. 76. 4. 7 d. 57. 97. Tubercular. D. 43. B. 41. h. had one  
 br. of small pox. Sp in 24 side old.  
 Wm & aunt - 1. w. 2 in 2nd week.

P. H. In 1868. had a fever much same as this fall. 10 weeks in bed  
 less attended; said it was not Typhoid. When got up in a year  
 had some with diarrhoea. Had pains when then empty.

# Arthritis deformans

11. 1897

~~52~~ 52 Savannah Ga.

(Dr. J. D. Martin)

Weakness in legs, a common thing noted.  
 Can doing steps - sharp pain thro left ankle. June 1st '95.  
 Gave in 2". Sharp pain in st. knee - that day. From that at  
 inter. pain. feet hurt in summer. hollow feet. no diff in  
 going up & down stairs. Feet heavy. diff to move. in winter  
 - not numbness. at des. to close fingers tight  
 In Sept '95. under finger told of. In Oct. '95. could  
 not move it at all. Lasted until April. then disappeared, all  
 the time weakness & stiff joints. In March '96. diff in walking  
 ankles & heels - not sore. In March '96. April 6. '96  
 could scarcely walk. feet so swollen. ankles so red  
 could not walk. In Feb. '96. some changes physio &  
 got quite well. walked about. started for April '96 to Feb  
 '97. appear just as well as ever. Could not hang his  
 clothes up before, after could do quite well.  
 In Feb. '97. began to 2nd of finger was much the stiff but in  
 10 days. but could not bend at. Feb April '96 to Feb '97  
 7th joint - became swollen. is there now. Bad since Feb '97  
 10th things helped him some what. and about month  
 before came in July '97. a rain down in health.  
 72. In 28 in ch b - no arthritis. 16. d of hand. S. 2 long  
 no joint  
 117. h. & well until 50 never ill. no infl then. went out of order  
 25. years ago p 114-120 then. 4 years in 1854. no attack since  
 28. trouble much.  
 P.S. very healthy looking man. 205 lbs. young looking heart in  
 220 lbs. of weight larger than at. both read - right.

all more of hand & arms made. - no out of sh. in elbow  
joints. wrist- swollen puff. motion limited. much  
ligan swelling - H. rose. Fingers not affected. Can  
buckle & unbuckle the clothes a.

Knees & ankles affected. Knees less than a's but both are  
out. out of patella seen. slight creaking. Ankles enlarge  
more on good, ligament thick.

Heart. 128. - no a.p.h. out. very fat. - Gallbl. 73.

at apex. 2. - no a.p.h. out. - a bit of a heart. -

very curious condition. rather suggest  
slag. of the cuff. but

comp. no short. pleath to incoven, except in  
violent exert. or on sleeping. - But health of a fat man  
as he 44. Has had this for 25 years of exert. was spij  
for life ins. - in 1872 for rapid heart action & has been  
rapid ever since - cont. no trouble until with the  
sail. - First 160 but buttes without trouble. -

limb good no a.p.h. - Bone - a p.h. good  
fond of - heavy color.

12 11 am + +. park left.

12. 21. with head - have the - better  
new man.

# Neurasthenia

11. 21. 97

32.

~~Neurasthenia~~ Cleveland and Ohio, Dr. Pestland

Wife of Mrs H. and bed room case.

Headache - 24. in bed and feet - aches in ball of foot... the next little... shoe make a differ never has it in a slipper - only when with - must take shoe off... I now liter fell a day after better... rolling to bed... Carried for 8 mos & my Mother helped it... the same time with the same on 11. 11. 11. after some time went to bed... only when lying down... income... with an aching pain, but later my Mother helped it... to right knee... Bottom of spine - then... continued it... only occas... sometimes... Pain in knee... Every month comes headache - regular.

Feet health good... & even... nervous & high string... appetite unsteady... 10 lbs - dark, dark rings...

Dark, nervous looking woman, heart all right... 8 in waist... low... is low... in... in...

1 and 10 - 70.0

Takes. dorsalis

no syphilis

2.28.58

Dr. Salmer

~~of the~~ 42 1247 Kenebec St. Washington D.C.

Com. of doc. toxia - long sudden

only 3 weeks. Eye 5 years ago <sup>left</sup> & T. rectus paral.

~~&~~ lighting hairs for a g. or so. none now.

Feared tried to strangle the eye. Dr. Keyser.

Ran the chance. 16. had gonorrhea. never any sore.

M. at 23. one child. - wife had 1 miscar.

no rash. no breaking out. <sup>no headaches.</sup> Attending a business.

3 wago no attack. 1st noticed when went to pass

water. no wife & child. Sexual power gone 3 weeks ago. A few days after went to Phila. under slipped suddenly. Down N. Several days. retention. Redness too affected. no control. concluded when left to be caught. all recent. Alaxia. noted tightness about the legs. Had noticed heavy last year. - could not walk on the dark. Trouble has increased very much. Water brown. <sup>reg. etc. trouble</sup>

Present: 1. Rumburg (2) argyl Rob. (3) marked toxia. 4. this for present marked unimpaired. R J R. very slight - L. much as in rump. (5) Sexual power. gone. (6) Distur of muscles & bowels. (7) Flabby. legs & no retardation of the sensation. (8) Eyes. Left & T. rectus ~~was~~ paral. no drooping of the eyelid. no atrophy of the optic nerves. R J 8m x x L & d..



good. Right nerve - very red - is changed about the  
muscle. Dynamometer - left 80 - right 90 - knee jerk -

7 inj in ear. imbedded in spine, very nervous & talkative.

7. H. 7. L. v. & well. healthy. M. dead 30.5. ans. B. S.3 w & S.  
died under. a fall & imbedded 30 mos had spinal disease. &  
hepatic

H. in school seen hard. imbedded running. Post A. N. Bald  
um College. Post Grand at Harv. Tutoring. Timmelled. for from  
Tobacco ann. No alcohol. no syphilis. High strong & enduring

Healthy looking man - robust - well nourished  
dark complexion dark beard. Pupils are equal  
react well to light and on accommodation -  
and on cutaneous irritation. Movement of  
muscles are perfect. Pulse is steady - good.  
Vasomotor system active, very marked der-  
matographia - sweats profusely. Heart sounds  
are perfectly clear. ~~second~~ The skin is free-  
ly movable over the occipital bone - Occip-  
ital ~~ridge~~ ridge is well marked - and the  
ridge on scapular tubercle well marked. No  
special difference between the two sides of  
the occipital bone. There has been a little  
tenderness over this region no thickening or in-  
duration at the base of the occipital bone.  
Movements of the cervical vertebral perfect. No  
hemianopia with coarse tests. Left optic disc - margin  
sharp - well defined - no cupping - no trace of neuritis - tint

Intestinal sand  
Mucous colitis  
Morning diarrhoea  
Pain. morphia habit

3. 17, 85

~~at 1000 ft. 36~~ . York Pa.

In Lincoln Neb. 75. . 2 years ago came to York  
gave up after the grips. a mucous colitis  
was to get at his fever. severe - in August. nervous  
system. Practised. In Oct. malaise pain in limbs v.c. T.  
grips again. Rheum. aching. cc. lasted 3 weeks - in bed. 1st well  
after rubbed paracetic anæst. shied. carb. almost - occas. muffs  
more mucus than membrane. came home. 3 weeks after better & still  
passing mucus. Localized pain in left hypogast. region. pain  
incr. by feces. - sore spot. Returned to Lincoln. In Chicago caught  
cold. Had pains again & one day a specimen needed & found  
no ulceration. Much run down & worried. Morning passage.  
mucus in stools. always when awake uneasy feeling - several  
passages - regular mor. diarrhoea because of the 3 or 4 passages  
until 10 am kept busy. Pain in bowels & very intense - cold remembrance  
Hygienic & morphia eased him. after white took more finally with  
a 1/4 eased him. In the day and a house - improvement of 2 or 3  
2. p. has passed during that time the something of morphia the after recess  
Regained in flesh. since has not gained in wt. - varies a little. appetite  
good. Now gen. health good but bowel trouble keeps up. In mor. grips  
Dr. Mercenbelder of York treated him. Passed sand small oval or  
irregular & beautiful garnet color, not affected by alkali or acids. Tested  
for phosphates - wh. was present. sent for the anal. Under the microscope  
looks small oval bodies. Only twice passed the sand - more now  
for 2 1/2 mos. ~~last week~~. The sand differs from the first. He brings a  
sample of about half a teaspoon of the brownish small - sand like  
& gritty. - the stuff in color. Morphia ever since over 1/2 - 1 1/4  
a day. (2 1/2 years). Mucous colitis gone. diarrhoea gradually  
changed, for 9 or 10 mos no mor. diarrhoea. local discharge.

Hoceph & belching

4-1-98

~~Hoceph & belching~~ (T.H.S.) 11. severe milder cannot do. a case

For 9 mos pain & belching & hoceph at night. not always - no loss in weight. Twin bro. only 2 lbs heavier. Began with all of that. nervous & at night. Group of pain in stern. at winter had these pains. at night. belching all the time & hoceph. (Dr. Bittenger's speech. & Dr. Hemm) Not for 3 months could sleep at night. Pain & nausea, & belching began Saturday am with hoceph. & not well the day. feeling much pain in stomach. Began before 10 o'clock. sometimes as early as 6 pm. Food no differ. secret the hoceph has lasted 1/2 an hour. once at 4 pm. Last evening whiffed & cream. Mrs S. Hunt followed with milk & cream & sugar.

Looking for good color. Liver and spleen not enlarged. Stomach not distended. Right kidney can be easily felt. Appendix palpable. Heart sounds very remarkable case. Probably nervous. are clear. Little relaxation of stomach - not marked. Jones's little bag.

5.20. Better, but relief all last Sat. night

May 14. Took cold. had tonsillitis. att. in Sat night. pain in mid of stomach no vomit. of the pain. no hoceph in the night. All day from 6 to 10 pm. no belching. Food after

able to eat for ~~the~~ Saturday night & Sunday morning.  
Sleeps with mouth open - not a snorer.

5. 24. 00. V. much better now. entirely. Return  
within 5 weeks with more pain. Comp of  
pain in stomach & spine & apr in chest. Pain in  
shoulder & side: Only in eve. Tho. occ in morning.  
Taking does not disturb. Some belching. He has lived  
not so much as first, but more pain & severe.  
Looks pale. good appet. Goes to school. ~~has a~~ <sup>has a</sup> ~~little~~  
plenty of green. Rides. up to 5 w. & strong

Looks a little pale and yellow - looks nervous.  
He is distinctly tremulous. Both this boy and  
the twin brother have a little tremulous-  
ness of the hand - more in the other than  
in this one. Liver is not enlarged. Spleen  
not enlarged. Abdomen is perfectly nega-  
tive. Appendix is just palpable - no tender-  
ness over it. Testis still a little enlarged.  
Apex beat is within the nipple line. Skin  
reflex a little active. Tongue is clean.

Anemia.

4-22-18.

~~42. Providence R?~~ (Dr King)

very healthy. Run down & never br. down & has  
affer heart. no ac. etc. Scf. 10 or 12. but  
all well. tubs. Very healthy, active in p. shd. lawyer  
sec shd in R. D. H. aff. past pulse & when taken in  
a. y. was white not shd. of breath. not going up hill  
not laid up in bed ext. Dec 3rd. I left for North Jan 25th.  
Weather no fever. got pale. no liver trouble. Gained  
6 or 8 lb. very much better. now than before. better ill  
183. died in 198. never had an attack of  
before. no disease. over work. no spec. skin symptoms.  
app. now good. dig. good. care put.

Well nourished, healthy looking man - little pale &  
sallow. Tongue is clean - ucs are clear. Good mus-  
culature. Radials are <sup>visible</sup> ~~feeble~~ - temporals not  
visible. Pulse easily compressed - vessel not

Hemoglobin at 70% specially sclerotic. Apex beat  
not visible, feebly palpable. No increase in the  
area of cardiac dulness. Heart sounds are  
quite clear at apex, over body of heart and at

base. No pulsation over manubrium - no bruit.  
Chest is well formed - lungs are clear at apices  
and at bases. Breath sounds large and  
full. Abdomen relaxed - soft. Spleen not to be  
felt - edge of liver not palpable. About  
normal area of liver dullness.

3.24. Better. Hemoglobin 90% at least. Ribs still  
a little pale. Pulse not fast - but I think as clear  
Has gained 11 1/2 lbs in four mos.

4. 14. 00. Improv & diet well 2 mos ago weighed  
200 lbs. strength not so good. active at  
work. Breasted. bit with bones. -  
Good cond. 85% hemog

Oct. 28th, 1904. He has been very well for the past two years. In the middle of September he had an attack of vomiting and purging and became very constipated. He has had several attacks since. Very easy opened to food to eat; also position and collection to do with the food matter. He looks really well, a little thin; tongue is pale clear. A little elevation and occasionally a little jerk-  
ing of the arms and torso. Abdomen is soft. Spleen is not enlarged. No pain over the epigastrium. Aorta is readily palpable. Liver not enlarged. Glands in groins are a little enlarged. No enlargement of glands in the neck. Very nervous and apprehensive. Does not want to go to boarding school.

Nov. 11th, 1904. He has been quite so well; had pain Saturday and Sunday; did not visit. The abdomen is a little distended; has just had his lunch. The outlines of the stomach are visible; lower umbilicus is just above the level. Slight slight elevation of the spleen. Abdomen is the as the finger's breadth below and level. Spleen is not palpable. Spleen is not enlarged. Liver is not enlarged. No glands in the neck. There is slight scrofulosis. The lower lip is very thick and is of a dark reddish color with

inspiration. Evidently marked dilatation.

Delivered two lectures on surgery and closed these classes for a week.

Dec. 23d, 1902. He was quite sick for a while; recurring pains; better for the past two days. Tongue is clean.

IN OFFICE.

9 A.M. TO 10 A.M.

2 P.M. TO 3 P.M.

7 P.M. TO 8 P.M.

TELEPHONE 585

James B. Hill  
James B. Hill  
James B. Hill  
Dr. C. L. Burn  
68 JOHN STREET NORTH,



Hamilton, Ont., 189.....

~~My dear Sir,~~  
yrd 21.

Family History - Father died  
aged 42 of "leucitis."  
Mother living. One brother died  
of diphtheria, one of pneumonia,  
two of Cholera Infantum.  
Paternal grandfather died of  
softening of the brain. Paternal  
grandmother alive and well.  
Great-uncle on father's side died  
of softening of the brain. Maternal  
grandparents - cause of death  
unknown. Two great-aunts on  
mother's side both living.  
Present History - Four years ago  
began to suffer from neuralgia in  
head followed by "floating" after  
eating. Neuralgia continued for  
twelve months a trileptic time.

IN OFFICE.

9 A.M. TO 10 A.M.

2 P.M. TO 3 P.M.

7 P.M. TO 8 P.M.

2

TELEPHONE 585

68 JOHN STREET NORTH,

Hamilton, Ont., ..... 189.....

Vomiting commenced continuing about six months followed by an interval of immunity for three months, vomiting was commenced and continued for fifteen months, stopped for a month, started again, and vomited five months, stopped for a month, started again and vomited two months, stopped two weeks started again and is still continuing.

Has never had any serious illness of any sort and knows no cause for her present trouble.

Came under my care for the first time March 25<sup>th</sup>. Told me she had been under the care of different physicians with temporary benefit. She was treated by a physician for ulceration of the stomach with benefit for the time being. Finally the patient consulted a Toronto Surgeon who in consultation with a physician

IN OFFICE.

9 A.M. TO 10 A.M.

2 P.M. TO 3 P.M.

7 P.M. TO 8 P.M.

TELEPHONE 585

3

68 JOHN STREET NORTH,

Hamilton, Ont., ..... 189.....

advised removal of the ovaries.

To this the patient declined to submit and came up to Hamilton & consulted me March 25<sup>th</sup>.

I made a very thorough examination throughout. I could find nothing in the chest, I could find nothing in the abdomen. No enteroptosis, undue mobility of the kidneys, or other reflex cause of gastric disturbance. I examined her bi-manually under an anesthetic. Uterus, tubes & ovaries appeared in all aspects normal, though slightly undersized. She had at times a slight inequality of the pupils. I put her under a tracheal tube but could find nothing in either lungs. I was unable to account for the incessant vomiting. The fundus did not appear to be in any sense irritable. The physician who treated me for ulcer of the stomach

IN OFFICE.

9 A.M. TO 12 A.M.  
2 P.M. TO 3 P.M.  
7 P.M. TO 8 P.M.

TELEPHONE 585

4

68 JOHN STREET NORTH,

Hamilton, Ont., ..... 189.....

I knew to be a very Capable man  
and I advised Mrs. Howell to  
submit her + voluntary incision  
over the region of the stomach in  
order to ascertain whether any  
adhesions or pyloric-stenosis  
might be causing the trouble -  
The patient consented and I  
opened the abdomen on April 1<sup>st</sup>.  
I explored the stomach, pyloric  
+ duodenum and the first part of  
the duodenum. The parts as far  
as I was able to reach appeared  
normal & the abdomen was closed.  
I felt I could not sanction removal  
of the ovaries, firstly because I  
could detect no lesion in those  
organs and secondly because  
I failed on the Clench Cross-Staun-  
tonian I find any connection  
between the vomiting & the generative

IN OFFICE.

9 A.M. TO 10 A.M.

2 P.M. TO 3 P.M.

7 P.M. TO 8 P.M.



TELEPHONE 585

5

68 JOHN STREET NORTH,

Hamilton, Ont., ..... 189.....

organs. I have explained the <sup>condition</sup> ~~of the~~  
the patient and her friends that the  
vomiting may be of cerebral origin  
the history of more or less head trouble  
on both sides of the family leading me  
to this view.


Myelencephalic structure  
(Remarkable case).

57.31.88.

'Copeburn: nt.'

~~1897~~ Oct 20 Hamilton nt. Dr Copeburn nt.  
History appended. Sanatorium started and worked on 11/12.

No neuralgia for 3 years. Complaints as soon as cat-  
form visit - sometimes cannot finish a meal  
soon after each visit - I does not eat anything for a day  
or so will sleep it down! Does not visit at all - some days  
as soon as she goes out, comes back - Throat she is not  
at all. Best weight 132 - now? visit same as last visit.  
Lungs well. Never visit at night. Has had the stomach  
examined. Sometimes full when a glass of water.

Sleeps well. Tried a milk diet for 4 weeks.   
after the operation of A along well for two months, no pain. comes  
down. - some goes down.

Does not look serious. Tells a good tale.

Never has been unwell - only a few times in her life.  
advised to go ahead & work - not to take any medicine

General condition good - Tongue pretty  
clean. Blood condition good. Fairly well  
nourished. After inflation no special dis-  
tention - stomach, lymphatic glands breadth  
above the navel. No peristalsis. Right kidney is not  
palpable

Nervous vomiting & hiccups.

5.9.98.

147  
Dr. Will of Ball.

~~Case No. 67~~

~~Dr. Will of Ball.~~ 11. Nashville Tenn). ?

"Mollyfrogs" W & S till 2 or 3 y. ago same -  
lost flesh without shell growth. not in bed. Vomiting  
spells. began 4 years ago. char. case of hiccups. & the  
mor. is superinduced by the hiccups. V. attacks when  
preg. eat her meals & go out & throw her food up - plays  
at ease, no nausea. latter more frequent an hour or so. no  
appetite. may have 2 a day - or goes a week or ten.  
Sitting in bed seems to disagree. No pain. esp. stomach.  
Pain in back. quite bad sometimes. Last week vomit-  
ed. lost her blood. Can tell 3 or 4 min before it comes  
up - a bit sick. no pain. doct. no gain for 3 years in weight.  
when I was doctor. Has grown. no out of liver.

The hiccups are freq. & general when they get bad will vomit.  
never vomits without having hiccups first - except at times  
Thin boy. red. hair. has evidently lost weight. weight 59 lbs.  
F. & S. not. in sex. 2 other child. ~~needed of~~ not sex. boy -  
seems self preserved  
or will respond to diabetes.

Ex. negative. no cut. skin no gland cut. T

11. 24. 98.

~~Robert [unclear] [unclear]~~ <sup>2</sup> Launberg n c Dr Prince

W. & St. when born. nat. labor. long. 2 n x ady  
all night till 9 mos old. noticed a nervous shaking  
of the body & a trembling - hands & head - h. very muscular  
mouth makes grimaces. does not grasp things naturally  
has grown well, good appetit. Telt. all cut back - Good.  
shakes head - does not lay to earth. - Can raise up. for  
pulling. - Recog. you. mother. does not know a strange  
playful. fits - jerking. ~~to~~ no stiffness. Has unpr.  
with her head. has not brought. no convulsions. no attempt  
to say words. Good pt. & time in floor. Had some very spells of lei.  
H. 2, no better as usual, notice such as at 9. or 10 month.  
W. now. healthy looking. mouth open. const. put fingers  
in. hears & sees. No ~~eye~~ myopia. Head is well  
formed, rather small. Grasps with an irregular move.  
ment of hand - & large size ady m. fingers. no  
stiffness - no squint. back straight - evidently a  
defective development. with a. 20 ashy - not  
good outlook. Did learn H. at 2 years with a decade  
of delay. Idly. the earth.

10 mile Dr Prince.

Locomotor ataxia.

& Sub. G.P.

c on Hem.

1-22 '06

~~33. 923 Permaure work.~~

Syph. 5-9. ago. syphilide. pretty thorough treatment -  
mucous. K. J. gums touched. sub-cutan.

Tong. a year ago - sore on it.

For a year (!) ruins at night - pains, a year ago - for a year.  
at times now. - a few drops. (2). First, attracted a kind  
of jerking of the limbs - a convuls. or cramp of the limbs

(3) Ph. pain for a week. 7 seven attacks. - sharp  
- thro. i.e. Tong. pulling in muscles. Chloof  
humors. (4) swelling & weakness - filling, cannot.  
going way of legs.

Ph signs. Heavily looking good color.

(a) K. J. also.

(b) Rumburg. not present.

(c) no anquill rib. (d) no atrophy.

a slight sclerosis. of arteries.

not aneur.

table the K. J. 20 yrs L. d. & probed 1 month.

1.30.00 Better in many ways - pains gone. still in. some troubles. passes during night.

ma a no. about, involuntarily. active vigorous. &  
lost a little weight. - no ill. - lost well. Cons. great.

X. 7.04 1 1/2 at Schneckfeldt. Freiburg. Rebhan,  
3 m fr Freiburg. Dr Lasker. Treated  
by El. a. Had many cases & loss & worse &  
shepher. & after attack in Prov. we are probably  
after 2 w. in Aug 1882. got along until April. Dr  
Pillshury used Triel powder. dead cons. Dr H.Y.  
got more so & then little things & squeezed out. sent for  
doctor. felt badly - had a crying spell. got near  
York to Bellevue. much. & bath. felt all right. Dr. came  
in. next am. Ruenthal came. Told Paresio had  
after another night. took to chopwood, Dr Franklin &  
Dr Herr. 3-4 days began to get better. 133. a little in  
& gained 20 lbs. Dr Herr. & Dr Franklin went in  
bath. went to Dr Preston - felt well. said go to  
mountain. Dr Depman in Berlin & said no Dr, but rest  
122. lbs. no headache or pain.

Recently went to N.Y. got position, was worse & hard  
work - broke down - suffered a little. Dr. a little after 140.  
gain of rest. - Had a little too much, land available at night  
2 in heart

Dr Leppmann. Kreuzberg Ufer. no 33.

Very Tachycardic - no flight - very much - no more in  
an hour with - no rest. 3 m

4-7-04. He looks very well. Definite Argyll-Robertson pupil.  
Station is not bad. Distinct radial sclerotic. A. b. is not outside  
n. 1. Heart sounds are clear at a. and b.

Transact. aphasia.

9/25/55

~~Case of Transact. aphasia.~~

Dr. Friedemann

Last Wednesday vomiting. mem. lost. Did not know she had been here. 2. am reg. memory ab. loss of mem. from 7. p.m. to 2. am. now all. right. no abt.

9 all - shiner, 3 y ago. Typhoid when young. 4 children. 1 dead. no headache, 9 not affected. For last ten years ailing. well till 5 years ago. 5-8. ago. Thus died. one spring had dumbago. spinal contusion. nose. This time at abt. 40 - lost but not yet nervous. Embarrassed. Pain in head, & ner. weakness. Drill headache in am. chest. could not eat in abt. 40. a little loss in weight.

gets up 3 times at night. more u. than usual. Drunk.

Exam. negative. no sh. arteries - sclerosis. Heart clear. no changes in the urine.

To go slow & care in rating & diet. H.S. gr. & H.V.

Heart-hungry & c. at night

9-29-99

(or glasser)

52. Lexington Va.

C. palp at heart. 4 years. Began with a shrill. rarely before from dysp. Cunct and now only a little <sup>or jagged</sup> <sup>short</sup>. Intermittent and spells of intern. 3 hours sleep & then in a spell - with a start & then seem begin quite violently. Sleeps soundly & well. & then 3 hrs after then a succession of attacks, sleeping can have believe. Attack 4 or 5 times in night in 9 mos. only relief is when they go to jawney gave spasm 1/4 & strophantus & of viii. Digitalis not of use or Datura gave strophantus

V. h. woman no catarrhes. no chol. hem. not a nervous woman. until the palpitation came. change of life began at same time has improved. not. May be much less severe. Diet no infl. specially. was made unnecessarily. always feels little dizzy. depression follows. 150 a slip suddenly & an indescribable depression follows. was due at pain. pulse 120 never

No trace of callosities. soft apex blunt, no shell

To use Paraldehyde & wet packs at night.

Wanted for glass

(used item for 24 mos)

1. 9.01 on in Charlotteville report the horn this summer  
 & very new since. More helpful at. Puts her unsubmitted

9 am Dis. 1. 5. 1888  
Dr M. J. Miller scared the life out of her. Excited & alarmed  
her that was dangerous. . Inter. puls. & heart hurry &  
great mind & nervous

~~7~~ 38. 211 W German St.

C nerves. - locomotion affected. Lasted  
for 6 or 7 years. Retaining reduced a cont. of the toes  
when stood up & the fingers became stark & stiff  
set stiff in extension & separated, every day - all  
like an ice ball in each finger.

G. h. good fine. not an ache or a pain, active in  
business. In bed. in last illd. to Congress. very heavy smoker  
7. 78-8-10 cigars. smokes in p. 7. 78-79. 68. 7 has  
arthritis. B & S. well. 15 nervous. No disease of anything in  
life  
Tumour. very heavy smoker. Nothing in life  
it in a moment, is entering. feels it at once.  
In 95- midships and. new stage. nothing else in smokes  
from him in p. does not feel anything in arm. no  
cont of toes or stiff of fingers. but of 4 or 5. hardly  
slight - it is in him. People stop him in street to ask  
I don't run. of writing. lists & crosses, him. so not  
do it at all. This for 3 or four years. Can under pressure.  
No pain - not even a passing pain - nothing but sensation of  
weakness & standing still he stops & has a tremor  
of the hands in the hand at rest. So far back as 1892 ~~can~~ he  
remembers feeling a little tired.

Very healthy looking man - well nourished - weight  
constant. Ind. (P.D. & Co) 8 or 1/4 for 10 days - sleep for 5  
1/2 h Tobacco & Whisk. Live a good life

198. Gait and station look normal. No disturbance of speech. Pupils are equal - react to light and on accommodation. Undresses himself readily and easily - unlatches and latches clothes without difficulty. When he wants to turn round he has to make a great many steps. There is a distinct shaking when he attempts to turn quickly - and there is a slight tremor of the whole body. When he bends forward there is a little decided shaking of the legs and of the trunk - not of the head. As he walks the arms hang close to the sides - does not swing them. After walking a few minutes the fingers and thumbs are in extension and a little separated and he complains that they feel stiff. The feeling of stiffness in the hands is from about the middle of the metacarpal bone - never seems to affect the wrist - there is never any drawing in flexion - always in extension. It is only when the fingers are at rest that they feel stiff - when at work no abnormal sensation. When free the fingers naturally work themselves into the extensor position. No incoordination - no tremor in either hand - either when at rest or when held out. When he first awakens in the morning he swings his arms - and there is no stiffness. The muscles are well nourished - no wasting. Sensation is per-

When he is at rest there is a little shaking of the left arm.

fect. sensations to pain, touch and thermic sense normal. Hands become sticky - has to wash them a dozen times a day. When the hands are in extension he cannot instantly, quickly flex ~~them~~ and extend the fingers. There is no retention of the grasp when he holds on to an object firmly - the let-go is instantaneous. The muscular grasp by dynamometer is right just 100 - left a little less. Knee jerks are plus. Station is perfectly good. He can go <sup>down</sup> stairs or down hill much better than up. Can stand erect without any tremor. When he stoops over a little the shaking of the limbs and trunk begins at once. Feet look normal. After removing his shoes and stockings the toes were drawn up a little. Big-toe and second widely separated from each other. Toes feel as if drawn to the floor but they are evidently drawn up.

9 all climes &  
neurosis

11, 30 89

~~38~~ 38 2222 Brundell ave.

C. 9 mos ago began with grippe; <sup>a week before</sup> contraction

(In Feb) of virus in ent. left side. sudden fell over suddenly  
called to his wife. <sup>Temperature rose, no symptoms</sup> severe pain in left arm, The  
muscle were cramp in leg & arm - left side. Crawled back  
to couch, did not lose consciousness, very much frightened  
that we relaxed. but was stiff for several hours.

Saw Dr Chambers 2 years ago, interested in chain works  
in Trenton, drunk in abd. Dr up there, send a tumor, came  
home next mor. Saw Chambers - 4 am. send no tumor  
no trouble with it till the grippe. Then it followed up that  
grippe pains in part of the stomach. - at the spot - I can feel  
a hard lump. Has had lately 6 attacks of the pain. 2 or 3  
days, weakened as happened after each one. Last 10th  
in 2 days. Pain is intense. Morphine relieves it - 8 or 9 grains.  
Pain goes & sometimes up the next. Gets cold, & bowels.  
And up - sweat freely. nose & pinched & forehead white  
was better & cramps while cramp - no attack. attack  
brought on by worry. Has had family trouble who has been troubled  
very much. Is very unstable. unaffected by diet. If walks up hill  
feels might - it is in & played out feels something - then  
a weight "stone hanging" & a cold surging up against me"  
no nausea. no vomiting. has been used more. can  
now in a week. goes to bed. severe headache at times. The virus  
stand up. cannot walk about, cannot stand, gets up

a great deal of gas. Is disturbed up with constipation. no tenderness in touching the hands. Two attacks in five weeks. at Trenton. Loss of 223 to 180 looks a bit sick - & pale. pulse good. tongue normal. Heart sounds clear. The right ear stands out as a prominent body. a Doctor said he had a tumor there. Nothing to be felt in abdomen. Liver not enlarged. While with Osburn in a 5 weeks trip. he had no attack.

Great deal of gas. relieves incessantly.

12-4-99. Bad attack on Sunday morning at two o'clock. Pain under right costal margin. Very tender now over the gall bladder. Gall bladder is not to be felt. No jaundice. Looks a little pale. Did not have to take morphia. This attack was short.

Pure soda  $\frac{1}{2}$  lb. tea 2 lb. 16. 2 lb. of soda water

mutual des. aster sclemis.  
ch. nephritis

12.10.99

or Gordon

~~London~~ 24 Richmond Va

c recent disturbance. about latter part  
of April induce pains in back. In June returned home  
again. alt. a cast passed. stopped work. told no swelling  
of feet. went to mountains. alt. visit. till Aug. 7 & 8th.  
rest 10 days in bed. went to Raleigh. in bed ab. rest 9  
weeks. alt. not abs. disappear. once in week did decaffe  
cast abs. with a few days ago. Since Nov. 1st. ~~was~~ gained  
& feeling pretty well. Pain in back still present. Usually  
cough. quantity. Sh. rarely not noted: O. 9. thought it  
first fairly recent action: about 12-14 went during  
two long & first night had all the rapid vent action.  
a week after. continued till full of 9 & 10.  
Depth at one. 7. very ind. alt. used. scars at angles of nose.  
Sh. very. of h. act. radially sclerosed. ab. in 5th. us.  
n. l. put in well ar. no thrill. apex syst. mur. prograde  
axilla & scapula. with. 2nd. acc at base. no diastolic mur.  
No Pul in vessels of neck. no x in veins.  
None alt in both sh. Sh. gr 1023.

To go ahead with work

~~55- 2219 2nd Ave.~~ 55- 2219 2nd Ave.  
 one with has epileptic attacks, miss in H. Walker). 7.72 can of Stew, in del. 80  
 E. N. leg, most, shake now & then when  
 excited or anxious. Noticed 2 or 3 rows, never before  
 only one leg, sometimes when no excitement, enough to  
 be a serious annoyance. no interference with walking  
 in any. in 8d June felt like a Rh in the leg. 9 and 10  
 were light. I come home with left arm & shoulder,  
 in back of painted - in cordage. (is left rounded under)  
 tingling sensation & joint made any serious pain  
 under the shoulder.

Gave up writing with Rt. hand 25 years ago. Injured  
 the arm. in some way. Teaching school when 25- y old.  
 after a tired arm. sleep & fire. got up up in comb for binding  
 & threw the bucket of water. the Rt arm arm so sore. that  
 next day. was unable to write. in the 2 rows until  
 & a pimple in wh. spoiled the hand. Dr. Mitchell said  
 let alone for a year & write with the other hand. No  
 writing, no loss of power. but. eat a glass of water  
 nearly full. & expect to take a hat full it would  
 be a spell. V. in & healthy. Not a new man.  
 always good weather. in the bed. some most shaking when  
 walks well. <sup>power movements made.</sup>  
 Sometimes a little sensation of numbness in it. not conscious of  
 it unless it is shaking.

Healthy looking man - good color. Station is

Dec. 13th 1899.

~~E. H. Walker~~

Dec. 13th 1899

Dr. Peter. E. Walker

~~E. H. Walker~~

Elisha H. Walker

# Pulmonary Tuberculosis.

2-20-97

12 Rush.

~~to 5th~~ 31 107 E 25 lb 51.

1 - been very is. 1st. Nov 13th. 2nd same night

3rd 14th. 4th 15th. 5th night of 15th.

not much. 10-12 month parts. often let go. last large  
one. Before 1st inf. in dig. this summer. Drip for  
a month - fever & gett back. Tooked back. this summer  
lost weight. 10-15 lbs. Fever same time.  
died a year in same house - inf 7 or 8 months

7.H. 7 d. 50 - ham always. on 1 & 2. 8, well  
noting trouble & not fat. nothing in his pants.  
always have been 4 am y or R. nothing found.

Looks pale and thin. Chest is a little long  
and narrow - measures from tip of clavicle  
to 10th rib 13 inches. Left clavicle a little more  
prominent than right. Less motion at left  
apex than right. Right lung is clear. Left lung  
impaired resonance at apex in front and be-  
hind. Numerous moist rales as low as 5th  
rib in front and to middle of scapula behind.  
Expiration prolonged. medium sized resonant

rises on coughing. Temperature 100°. Pulse not above 100. Went ad in Jan. returned April 10<sup>th</sup>.

5-3-00 Resonance ~~very~~ slight difference. Has gained 17 pounds. Few crackling rales at the end of deep inspiration. No tubular breathing.

X .20, Wt. now 127, up to normal. Good app. - good dig. no cough no expect; no fever  
Tuberc. <sup>in lung</sup> started in April. Tuberc. in Sputum

I.7.01 In town at work 3 hrs a day. - good app. & sleep. Have a little fever. cannot get rid. weight same - gained 3 lbs in 3 months (doses no claus. before. T. b. a. per. 1.5.01). Gen. vigor fair. able to do agreed work  
Left apx & H also involved. Evidently has been an & leucemia

good. No trace of any tremor of the head. No characteristic attitude. The right arm is just as well nourished as the left - no wasting. He uses right hand and arm for everything. Little fine tremor - but not more than are usually seen. Dynamometer - right hand 85 - left the same. When squeezing dynamometer there is a slight involuntary tremor of the right leg. It shakes - too - on any excitement or any special feeling of responsibility. It sometimes shakes when the leg ~~is~~ is quite at rest. Never shakes when he lies down. All the movements of the legs are perfect. Knee jerks are present - equal on both sides. Toe shake - and there is a rhythmical movement of the ~~feet~~ foot on the ankle. By strong exertion of will he can stop it for the moment - or if he moves the position. It affects the whole leg. The hand never shakes with the leg - not the slightest incoordination. When he throws the whole weight of the body on the right foot it will stop the shaking. If he stands ordinarily and leaves it loose when excited it is more apt to shake. The pupils are equal - of medium

size - react slowly to light and on <sup>actively</sup> accommodation. The face looks natural - not at all impassive. Only once on examining the pupils - when the leg was shaking - there was a distinct and positive - but slight tremor of the head.

2. 6. 07. Looks well. No change in the legs. not quite much in ord. way but does when does with work to "my great little wheel with the band off." Any with the machine will cause it

III. 10 05. Tremor of hand in 1806. now Parkinsonian  
features. & marked T. of hand. & quite  
is severely. & Aug.



boiled up stomach & took the acid. Much relief comes from  
sour bellies. From 150 to 167 in two months. Has had the  
pain within a month. Sometimes does not hurt. Soda.  
The pain. Never an acute pain since 20 years double up. but  
that went away. Pain is relieved by pressure & kneading.  
Skin, no red but light white.

(1) 20 de cels. (2) fresh humors. (3) about 3 1/2 drops.

Henda Nos.

3. 8. 00

~~\_\_\_\_\_~~ 28 Louisville Ky

c. of 3.4. ago suby. to headaches  
periodically. Asheville + Louisville. Thot. to the Malans  
also. 8 mos ago pregnant. violent + frequent.  
Murphy. (Dr. Flexner did much good. decreased sleeping  
but still not well.

7. #. . Mother not, very reverent. died of surgical pneumonia  
at Lancaster. 45. Married for 10 years. 7. living 60

And B. 1. died 18 April, S. 2 L & W. Both heads broken.  
H. long & can remember. When young, lay with snoring  
line in front of eye. pain after. Triangle. went for eyes.  
This by the death 5 y. ago. Eng 21 days. narrowed down  
to every other day. Sidel Bellis. Soluble last fall. Last month  
4. . Again. with sens. of numbness & phy lussula  
duller & inert. Eyes insensitive, feels cold. cannot  
of feet. Cannot feed. Eye with pain. Hawsen seldom.  
no vomiting. Pain in all attacks caused vom. Not in a  
year a vomiting. headache. Ford. Any needs in diet  
Dr. reg diet great improvement. weight fairly well.  
2 peculiar things. intense itching for 18 mos it amens. Come  
from me of the headaches. Birds made the nasal mucus. for  
about 2 years ago. followed vaccination. arm swelled  
19 hrs in left arm. Healing in weeks. He in end an abscess.  
None large amount. one at night. clear as rock. Nothing  
above but the ure acid. It's give too. Education &c

mm. cond.

Of an imp. cold. headache. once a day. now. almost not  
limited - a person. So now 18 mo since had the very bad spells.  
6 mo ago sev. severe ones. Colic. This to day given.

Yes. relief. Headache is always frontal.

Robust. healthy looking man - good color.  
Tongue is clean. Pupils are equal. react to  
light and on accommodation. Skin reflex  
fairly active. Well marked corona of veins around  
the line of attachment of diaphragm - unusually well  
marked for so young a man. Pulse is steady - regular -  
easily compressed - vessel just palpable. Radials are not  
visible. Distinctly anastomotic pulse. No capillary pulse.  
Abdomen looks natural. Liver flatness begins on up-  
per border of seventh and extends to costal margin -  
edge not palpable. Right kidney can only just be  
touched. No dilatation of the stomach. Spleen beaten  
in normal situation - no thrill. Aortic second not ac-  
centuated. Heart sounds are clear - no increase in  
area of cardiac flatness. Knee jerks are normal -  
not specially accentuated. Dics are clear - vessels  
a little full, particularly the veins.

*Menasteria bostonica*

57. 1/4 10

52 Bradford.

~~57. 1/4 10~~ 57. 1/4 10

For some time depressed & uncomfortable  
in head. unwell. & in. neck. - Mumburn in head.  
Travelling for 2 weeks. 2. 4. ago some broken up. further  
deaths.

Looks thin - sunburnt. Pupils unequal - right  
the larger of the two - react slowly to light.  
The right in full light is about 15 mm.  
the left scarcely 4. Pulse quiet - regular -  
tension good - 172 - which is unusually  
high. Skin reflex active. Apex beat is in  
5th - normal situation. Sounds are clear  
at apex and base. Knee jerks are normal.



Dr Scott

~~Dr Scott~~ 5-1.

Bronchial trouble. Colds. 1<sup>st</sup> winter.

2<sup>nd</sup> y. for many years. No Rec. of fever. Colds.  
no event - passes thro. eyes & ears. Cough all winter.  
2 or 3 hrs thro the night. Tight. air loss. Strength.  
Weakened by the frequent colds. Coughs hard, now, 4<sup>th</sup> y.,  
much. slowly losing  
At 7 y. 7. died of acute lung trouble - tillage. Starts his  
colder than. June 1891. B. 2. S. 2. 1.5 lbs. 1 ad cough  
for 40 years. In the C. was thin in Southern Pine & Pinehart  
when free of C. C. Much diff. in breath when was cold at  
night.

Lungs well - Swelled up of cough. now on left side  
general. Left sh. a bit down. No great flattening. a bit wet  
or cold. Some clear. max. int. under man. no flat. under  
clav. Slight cough res. at apex in p. well marked in p.  
7 res. at left base. a few rales. no tub. br. no st. prot. of  
apex. rales at base. small, not bubbling.

Dr McCune reported no tub. Bacilli

# 7.02. 1<sup>st</sup> winter. very dry. now cough. cold for over 1<sup>st</sup> & much  
increasing & labored breathing & much expect. Slight fever  
no fever. Begins with very cold. no asthma in winter.  
very marked chronic mastitis - with singular enlarge-

ment. Cicino rales everywhere over the front  
of the chest. ~~No~~ flatness. Eren where over the  
back of the chest cicino rales. Prolonged  
expiration. wheezing, asthmatic breathing.  
No features.

Paralysis - secondary to  
breast cancer.

10-10-60

~~Paralysis - secondary to  
breast cancer.~~  
2

~~Paralysis - secondary to  
breast cancer.~~

Paral.

Dr Tiffany Operated. Feb. 19<sup>th</sup> 98, left side  
saw me 24 before.

Pain in chest & back Aug. 99. Then went roller  
on rt. shoulder & arm. Place on sh. blade size of palm there  
pain acute. under left side, shot round the side. Very  
intense, excruciating. acute, night after night. 2-4 a.m.  
chill in rt. arm. Also in left. <sup>From Aug. to March</sup> Shingles  
in rt. shoulder & chest. Nov. In March, rain down whole  
back & one eye became paralyzed. That night in waist  
down rt. arm. Could not sit up. remained paralyzed  
& only began to walk in Aug. use of limbs & body began. a  
thorician had the fever. Tumor which was fatal, Dr. said  
bladder distended 5 inches. T. not right. <sup>meninges</sup>  
legs stiff. <sup>meninges</sup> much pain down spine. To walk with  
quadriceps <sup>quadriceps</sup> and not move down down to death  
door. <sup>any</sup> jaw distended. Colder. swelling disappeared  
& dis. also. Morphine reduced. July began to get better, more  
+ energy 8th June, steadily getting better still have to take a little  
little pain in rt. arm & sometimes in shoulder & left. Foot great  
stiffness can only sit or side for a few moments. Walking  
well. without cane goes up & down stairs. stiff. Sit down  
easily. In am cannot walk at all. From Sept to 1/2 in.  
Chgo. recurrence. Dr Tiff. ~~removed~~ Test not made. - par. not gone  
away.

(over)

The spine is quite straight - no kink. Right  
shoulder blade is perfectly natural. Can  
twist the spine perfectly with bones are quite  
free. No glands enlarged above the clari-  
cleat at all. A little nodule just at the  
angle of the apilla - another little spot  
like a pea in the second intercostal space -  
and another on the fifth rib. The one  
at the angle of the apilla was larger.  
The knee jerks were increased. Lungs  
are quite clear. Heart sounds are loud  
and clear.

# Hydroed Laryngismus

10 22, 10

Rem. case.

Dr. Miller

11. 7m

~~3/4~~ 3/4 Kings Mountain N.C.

Naso-pharynx. was in spasms of throat  
 7-8 yrs. ago. In an arm sometimes, turned on  
 a few minutes. face swells & cyanotic, eyes <sup>but off</sup> closed,  
 & he groans for breath. never before 7 years ago. was  
 & just for no reason. died & got much worse and  
 had laryngitis & was all over in hands & feet. S. A. never was  
 so much & got exhausted. In 10 & 11 years. In 12  
 & anything that could help him would bring in. The  
 pharynx galled in his throat. can swallow well & does  
 not suffer any more. Sept 1898. latter a fresh cold. Has  
 colic. Relief was striking "into the pharynx". 10m. Tuber  
 1/2 a pt. a day. Red of them for two years. Began 2  
 years ago. was then dyspeptic. Coughs but little,  
 all night, and suddenly, laryngeal. weight more in  
 2 lbs. more. Last week last attack - all right even  
 at cannot control his voice. 3 1/2 yrs. ago had the voice ~~was~~  
 changed. Now a genuine staccato-syllabic voice with inter-  
 alia. Glottis ~~of~~ dead. at point after several  
 a staccato voice. rather low & with an effort. the  
 same 3 1/2 yrs. ago. & now for 3 weeks. In saying "long"  
 opens the mouth, purses the lips & makes a good while  
 but it is not. nor can he learn to talk easy & it does not  
 please him. Sometimes cannot get started right. has  
 to accept a way out. not as he naturally would.

in man. 6 child. V. a. a man until 7 y ago. with ex. 12 years  
has done a great deal. In a short time (15) conf. Hard student, unclouded  
clearly apprec. active.

7.4.7.77.9.2. M 69. was afflicted 12 years to about 3 y ago. Had  
Kidney trouble. Was nervous. As had was not nervous, was hard  
& very much & was after a blood fever in young life. But children  
suffered at times. Dr. Neely said he had never seen him before 7.4.  
ago. Not near to shill - not in view. upwardly. No serious illness  
19 y ago. 16 y ago had healed. 19 y ago had enlarged.

7.4.9. I then began strongly - felt he had to sit down. felt M. about  
and 1/2 pt. came in again started home 'like not to rise  
at night' peculiar murmurs, came all over him. voice was  
not affected. Had the glaucoma attack that was a bad one  
saw for months. nose felt all down. Dried up for 3 months  
afterwards to the red nose. the nose. attacks one a day.  
were not serious. Went to 'Good Helper springs' 8/20 had came  
home in 3 w. & day he got home home of the trip. & handled  
an animal hard all night in bed again 2 w. went to the  
country to Lincolnshire tree & Kraus (d). 2 w. more. came  
home in Oct. more for a year. +. in good health but had to  
be careful in diet. Began to feel weak for a week or so had  
cough. Kraus again. <sup>1 y ago</sup> stopped. 3 w. then 2 years of freedom  
from 2.4. ago. since Dec. went to

appt. good. was to be careful. Bed at 8. sleep + 12 w. 2. Throat all  
full - phlegm & pain but all down many not sleep a week. has  
to raise up & knock it out. restless. In 3 w. even night has  
been happened. Had no same 3 years ago. Then could not look  
down above a whisper. talked low but not as he does now.

reality looking fellow - dark hair - dark eyes. Looks neurotic.  
Tongue is red and clean - has not an asthmatic facies. Chest  
is well formed. Large framed - large boned man - not very  
stout. Skin reflex very active - hyperaemia comes out at once.  
Neck looks natural - no enlarged glands. Thyroid and hyoid natur-  
al. Apex beat is in normal situation. Chest looks well formed -  
clear in front. Perfectly clear at both apices. Heart sounds are nor-  
mal at apex and base. No increase in the area of cardiac flatness.

XII - 18 - 00

Dr. Tyles  
miles

Dr. D. Webb  
Wash

+ 3. 'Mc C. Wash.' brick.

Cerebra vermicular. 3.7. ago. 90 days. came  
 to wash. 97. Any it at nerve chill - <sup>relate</sup> severe head pain.  
 much pain. read a note on arm after it. 98. 99. 100. 101.  
 succeeded to 100 in Oct. 102. 103. began badly after that  
 time. well regulated. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 222. 223. 224. 225. 226. 227. 228. 229. 230. 231. 232. 233. 234. 235. 236. 237. 238. 239. 240. 241. 242. 243. 244. 245. 246. 247. 248. 249. 250. 251. 252. 253. 254. 255. 256. 257. 258. 259. 260. 261. 262. 263. 264. 265. 266. 267. 268. 269. 270. 271. 272. 273. 274. 275. 276. 277. 278. 279. 280. 281. 282. 283. 284. 285. 286. 287. 288. 289. 290. 291. 292. 293. 294. 295. 296. 297. 298. 299. 300. 301. 302. 303. 304. 305. 306. 307. 308. 309. 310. 311. 312. 313. 314. 315. 316. 317. 318. 319. 320. 321. 322. 323. 324. 325. 326. 327. 328. 329. 330. 331. 332. 333. 334. 335. 336. 337. 338. 339. 340. 341. 342. 343. 344. 345. 346. 347. 348. 349. 350. 351. 352. 353. 354. 355. 356. 357. 358. 359. 360. 361. 362. 363. 364. 365. 366. 367. 368. 369. 370. 371. 372. 373. 374. 375. 376. 377. 378. 379. 380. 381. 382. 383. 384. 385. 386. 387. 388. 389. 390. 391. 392. 393. 394. 395. 396. 397. 398. 399. 400. 401. 402. 403. 404. 405. 406. 407. 408. 409. 410. 411. 412. 413. 414. 415. 416. 417. 418. 419. 420. 421. 422. 423. 424. 425. 426. 427. 428. 429. 430. 431. 432. 433. 434. 435. 436. 437. 438. 439. 440. 441. 442. 443. 444. 445. 446. 447. 448. 449. 450. 451. 452. 453. 454. 455. 456. 457. 458. 459. 460. 461. 462. 463. 464. 465. 466. 467. 468. 469. 470. 471. 472. 473. 474. 475. 476. 477. 478. 479. 480. 481. 482. 483. 484. 485. 486. 487. 488. 489. 490. 491. 492. 493. 494. 495. 496. 497. 498. 499. 500. 501. 502. 503. 504. 505. 506. 507. 508. 509. 510. 511. 512. 513. 514. 515. 516. 517. 518. 519. 520. 521. 522. 523. 524. 525. 526. 527. 528. 529. 530. 531. 532. 533. 534. 535. 536. 537. 538. 539. 540. 541. 542. 543. 544. 545. 546. 547. 548. 549. 550. 551. 552. 553. 554. 555. 556. 557. 558. 559. 560. 561. 562. 563. 564. 565. 566. 567. 568. 569. 570. 571. 572. 573. 574. 575. 576. 577. 578. 579. 580. 581. 582. 583. 584. 585. 586. 587. 588. 589. 590. 591. 592. 593. 594. 595. 596. 597. 598. 599. 600. 601. 602. 603. 604. 605. 606. 607. 608. 609. 610. 611. 612. 613. 614. 615. 616. 617. 618. 619. 620. 621. 622. 623. 624. 625. 626. 627. 628. 629. 630. 631. 632. 633. 634. 635. 636. 637. 638. 639. 640. 641. 642. 643. 644. 645. 646. 647. 648. 649. 650. 651. 652. 653. 654. 655. 656. 657. 658. 659. 660. 661. 662. 663. 664. 665. 666. 667. 668. 669. 670. 671. 672. 673. 674. 675. 676. 677. 678. 679. 680. 681. 682. 683. 684. 685. 686. 687. 688. 689. 690. 691. 692. 693. 694. 695. 696. 697. 698. 699. 700. 701. 702. 703. 704. 705. 706. 707. 708. 709. 710. 711. 712. 713. 714. 715. 716. 717. 718. 719. 720. 721. 722. 723. 724. 725. 726. 727. 728. 729. 730. 731. 732. 733. 734. 735. 736. 737. 738. 739. 740. 741. 742. 743. 744. 745. 746. 747. 748. 749. 750. 751. 752. 753. 754. 755. 756. 757. 758. 759. 760. 761. 762. 763. 764. 765. 766. 767. 768. 769. 770. 771. 772. 773. 774. 775. 776. 777. 778. 779. 780. 781. 782. 783. 784. 785. 786. 787. 788. 789. 790. 791. 792. 793. 794. 795. 796. 797. 798. 799. 800. 801. 802. 803. 804. 805. 806. 807. 808. 809. 810. 811. 812. 813. 814. 815. 816. 817. 818. 819. 820. 821. 822. 823. 824. 825. 826. 827. 828. 829. 830. 831. 832. 833. 834. 835. 836. 837. 838. 839. 840. 841. 842. 843. 844. 845. 846. 847. 848. 849. 850. 851. 852. 853. 854. 855. 856. 857. 858. 859. 860. 861. 862. 863. 864. 865. 866. 867. 868. 869. 870. 871. 872. 873. 874. 875. 876. 877. 878. 879. 880. 881. 882. 883. 884. 885. 886. 887. 888. 889. 890. 891. 892. 893. 894. 895. 896. 897. 898

could not always read in them. Can even tell in and whether  
the weather has changed by the swelling of face. Was last attack  
of great swelling, face in one side with -

Healthy looking man - good color. No trophi.  
One slightly raised patch on the left fore-  
head - and one outside the outer canthus  
of the right eye. There are coming out about  
the neck. Distinct ordinary urticarial  
patches on the arms. Numerous patches  
on the right arm. Signs of old acne on  
the back - a good many scars - a few  
fresh urticarial wheals. Vaso-motor  
reflex very active. Skin of the chest  
is pretty free at present. Very ex-  
tensive urticarial rash (simple) on the  
legs. Liver is not enlarged. Spleen not  
enlarged.

Neuroasthenia  
Ref of the life Insurance  
for the head injury in 1888.

II 22.07.

II .8.05

~~39. Philadelphia. Pa~~

El. R & lighting work - travelling all time,

Smiles since 14. to 6 months ago. 10-12 cigars. Cheeser with  
2 yrs ago married 8 y. car. Mother neurotic. active.  
died at 54. diarrhea. 7. ab. & w. 77. Part. under a gas  
can recall that father had <sup>gas</sup> towards his head for 6 or 7 years.  
2 y. ago 1 week in bad shape. Dry, rest duffy - did not sleep.  
grippe Jan 99 - got rest. to Palm Beach. That day after dinner  
"felt bit control" - never even daughting loose in body" instant  
saw heart all right. Got better. When left felt A.I. 10<sup>30</sup> pm bed  
3 am cramps in bowels 5. again diarrhea. 6 am. Weak & duffy  
Went to bed. 4th time to w.c. & fainted away. Had slight mending  
in bed 2 days - while lying down had a faint spasm about the heart.  
esp. when the fields were out. the morn. Got out. sent 133 - 1/20.  
Dallwood with Salinger. There seized with some pains & heavy  
spells. Cramps & diarrhea at Atlantic City 5 or 6 w. after (in March).  
Tow. Decem. who said new break down. not in worry - business. Took  
semi. rest cure. for 10 days. school & massage. Dugg a massage  
& a trip. 3 weeks O.R.C. for N.Y. by sea. Went to Atl. City. Built up more.  
at home cramps & ner. went to Europe - felt well. London bad. Low  
2/10. 30 days off in bed attack of some kind to doctors. Dr. Seelig did  
not feel comp. - some fear. attack of diarrhea at Interlaken. Voyage back  
good condition. Felt 90% better. 4 of last July. at all. aft. Had been  
going up & down every day. Excited & strain. Partner a "plea-knuckle player"  
On 4th played cards - better in morn. Set off fire works & after it supper.  
To be 4 on his following day. 4 am said pulse excited. Again. 5.  
made him rest in camp & checked. Said wait till the dr. comes & said where.  
do you wish to. at what point the young doctor. & did not pass him

[illegible]

2/7/05. The apex beat is in 5th, just palpable; no increase in the area of flatness. First and second sounds are clear in recumbent and sitting postures. No murmur at pulmonic area. Aortic second not accentuated. The knee jerks are normal. Pupils are active, react to light.

*Wm. Chas.*

Spondylitis post typhoid

3-11-07

to King

~~28~~ 28 2200 Cullum ave.

Ty. f. in Sept. very bad. protracted - no complete  
recept. then. after <sup>while</sup> curative. began rigid of muscles of back  
and to sleep & change position. pain in effort to move. to  
sleep or pull up or turn over in bed, cry out. Lashed all  
along - a steady abatement - up & about attend to business  
for last 3 mos. gained in weight. has much recovered.  
Now local signs. Dorsals little a little curved. crinkled with  
diff. post. Mother died of cancer of ut. while he was convalescing  
now back from trouble. no spot in posture. & sometimes  
short across. & no pains down the legs - cannot stretch legs out  
straight. If he down on floor the pains on getting up. Bladder  
& rectum all right. Cannot work as well as formerly.  
after he got up shuffled along - could not lift his foot  
for fear of pain.

Prog. good

Healthy looking man. Evidently neurotic. Good color -  
good nutrition. Movements are all rigid and good.  
He has a distinct obliquity of the thorax - and of the  
shoulders - the right shoulder is lower. This was  
certainly present before the typhoid. Of the move-  
ments of the spine - the posterior is fairly good.  
The lateral are good. The anterior movements

are very restricted. There is little or no mobility in the lumbar spines. The natural curvature in the lumbar region is perhaps a good deal exaggerated. The rotation movements are fairly good. He cannot stoop over to tie his shoes - or to touch his knees. No disturbance of sensation. No trace of prominence of <sup>any</sup> of the spines. There is no tenderness except low in the lumbar region. He has had no girdle pains. Knee jerks are a little increased. No Babinski's sign. No ankle clonus.

Abdominal Migraine.

6.4.6  
or Helictism.

~~Abdominal Migraine~~ .18 Seewickley Pa

c of neural. abd. . . . .

5 y. old. cried id 7th mo. . Filled with glass  
at 6. Regain + have attacks right headache  
after regaining to short. at intervals. at 12 head  
described + a neural in the abdomen, not head, not  
so reg. as headache. about 6 yrs ago. "It was  
let. nothing + dulling" Mother described. Last Jan.  
10 # 10 hrs. Late at night - would + 7 or 4 and  
die and as day light came. now they are longer  
last 2 to 3 hrs. goes to bed. 1. morning in and 3 or 4  
given increment every. reg. of the pain. now  
starting point. cannot in short. position irrita  
no. swollen, with + with a term. h. no doubt  
and a little, now even water unless it is hot. in  
down in 2 weeks. same Jan. has and is a month.  
3 years ago in Jan. disc. L. reg. 7-8th y. 11 short  
curr. of spine, got a shoe. hardest + unusual change  
allied + descended. very had been getting worse, no  
attack Jan 7th all June a day slight one. no  
in the other inf 3. in the year. Better ever since. That  
all due to the shoe. But reg. have been coming back  
but now so severe. nothing are seen. 1 per aging is when  
skin to pain + mental dis in childhood.  
no spots on the skin. no swelling of the joints  
no cloudy urine. no. . . . .  
no marked an. . . . .  
everything normal. nothing above with monthly period

Feb 11 03. went home. Gave up new drawings & measuring. (partly) in vain. Begun to sketch out the notes - a bit when in crisis came and she read it over in introduction. Found myself a runaway after that.

# Renal Sarcina

6.8.01

~~28.8.01~~ 35. Bd St. Boston.

Porto Rica. (contd) never ill. Excellent  
a Carzangos - Star. In 1898 P. Rica. stayed there  
hard food. Rest business. 9 miles. Back in week. 142  
at 122. 8th of 99. Not ill there. Came up in 99. Lived  
a while after he moved. Went back Dec 99. Turned out yellow.  
Stays till April is very well all winter. Rel. May 1900.  
In July 1900 back to P. R. all right. Weary & drowsy.  
Returned in Oct. 00. a week very busy. Had sudden one  
night an attack of bloody urine - preceded by nothing.  
but 1/2 hr after stumbled & jumped up stairs. ~~Spent~~ Blind  
appeared. - no pain. ~~and~~ In am clear. Back dis-  
appeared. That night hematuria again. Next day clear  
third urine. Could not pump ship. Saw Jim Thompson.  
4th Jan. Blood. urine. Had sweat alone no trace  
malaria, no poor good appetite. Returned to P. R. ready  
2 days urine clear & quickly. In 2 days all right. Got their  
nov. 1st. felt best well - no return till end of Jan.  
On horseback - horse plunging head back - nose bleed. long.  
That night felt best. next day purp. then almost in bed  
in eve. had a chill. never one before. - next day better  
did not pass blood. nose & eye dull ache & that afternoon 6 pm  
blood again & almost cured after better. 2 days after went  
back to N. of Island. Cont. to hang along. D. puzzled. found  
a little swelling in the abd. - meanwhile no malaria in  
came up to Thompson. March 20th. again end of Feb. 1901  
blood... spleen enlarged. Malaria & 2nd Sept. ~~on~~ ~~about~~ same 9 miles  
& dark bill. In 3 w after. got better. Gained in weight 8 lbs. 2 w after  
another malaria spleen greatly changed - much smaller

70 well & doing all sorts of things. not very careful. But. ~~seen~~ ~~on~~ last  
have mud - about a very slight.

Looks pale - certainly a bit sallow. Conjunctivae a little  
pale. Color of lips good. Tongue clean. A few little  
varicosities on the lips - none on the cheeks.

Pulse is steady - regular - no sclerosis. Abdomen  
looks a little full - slight prominence in left  
hypochondriac region. Spleen enlarged - the

lower border in nipple line - exactly 10 cm.  
from c. m. To the right it does not extend be-  
yond the ~~upper~~ paraxternal line - edge is round -  
ed - notch not palpable - freely movable - can  
be tilted forward - comes out directly from  
beneath the costal border - extends deep into  
the flank - descends with respiration. In pa-  
tient in the epigastric region the mass can be felt far  
out over toward the middle line. Below it is rounded. No  
distinct edge to be felt - posteriorly or behind - no  
definite edge. Upper limit of excursion is far back.  
Clear over the 7th 8th & 9th interspaces - almost  
to the costal border to the right of the apil-  
lary line. The ascending colon cannot be felt  
well in front of mass. Liver not enlarged.

Gortre.  
Reynolds' Disease

6. 11. 00

Dr. Teller

~~under~~ before Shreveport. Ohio. -

~~C. 1. Charlotte~~ 3 4 ~~Charlotte~~ 2. c. in Cornwall

c of ent. of the thyroid. does not know how  
long. + or 5-6. also reacted to neck & found 1 accident  
for 3 or 4. has probably been here. No dis. in general  
health. well & strong. no fever. no palpitation. well for 24  
7. H. no members of family. with sister. &c.

7. H. no member of family. with great ...  
Perfectly healthy looking man - good color -  
brown. Pupils ~~are~~ equal - react to light - no  
tophi. Tongue is clean. Pulse is 50 - regular.  
Neck - decided fullness of the thyroid - little  
more in right than in left lobe - bulges the  
sterno-cleido - middle lobe also a little en-

K.I. gm x L.I. for 3 weeks of growth.

larged. Communicates pulsation from the carotids. Maximum measurement over the root of the neck in the thickest part of the tumor. Slightly-drawn tight- is 37 cm. The



Ch. muc. colitis

Remarkable case.

X 1. 15. 01

St. Louis, Mo.

S. S. Klein

~~St. Louis, Mo.~~ (Jr) 27. 4408 Delmar ave St. Louis mo

Ill 3 years. - beg 12 y ago. - came = pain in left side  
thor. th. phend. - no swelling in joints but pain. Last 4  
2 wks. pain in left side, & swelling - along vein in poor health. &  
swelling remained here on joints still. all over. & loss.  
very thick & irregular a irregular. In 3 y. bowel trouble -  
but 8 years, have few bowel. 3 y membrane began to come  
& bowel would swell to enormous height, not over. not upset  
Had well shell in bed last year Jan 13th. in bed till March  
begin of the bowel trouble - membrane & hemorrhages. Since  
was down to 85-90 July 1900 He better for a time after that more. Operation  
in the bowel. Exam - polypus in the bowel & taken out - no sign.  
but end the rectum. not better - but is worse. Still passes mucus,  
bowels cramp, always - mem. come up are water. Recs. have  
come 1/2 - 3/4 yard - & whole skin. 1/2 - 1/4 full & in  
eye. Pain of druggs resistant - sometimes acute pain, sharp  
at night - but in weight. 120 - to 102. He comes decaying all over  
no worms or matter. Round & same in stomach as for  
bowel.  
Does not look badly.

7 ft 6 in. all living & S. wh. dies of P. muc. 7. ill. now not over 100 lbs  
not over. no over. in family.

Looks pretty well in the face. Pulse is good. Abdo-  
men looks natural. Recti are a little tense -  
very difficult to palpate. Descending colon can

be felt as a firm, distinct, unusually  
well marked tube - can be traced up  
as far as the tip of the 10th rib. There  
is more tension on the left than on  
the right side. No special tenderness  
on pressure over the flexure. Nothing over  
the stomach. No special dilatation of  
the stomach itself. Heart sounds are clear.  
No enlargement of the heart. Kidney  
not to be felt on the right side - easily  
felt on the left.

ad. *Triturus puennianus*  
Reminiscent of *leucurus*.

XI. 20.0'

Dr Morgan }  
" Howell } dark stage.

~~25~~ 25. Charleston N.C.

c bad cough - 1/2 is so recently more & spit up  
mucus. hoarseness in v. has gained. out - due much to  
v. h. man. not married. ~~no~~ Red weight - 137. now 132.  
7. L. & v. m. d. of regular. 9 b & 5 all in & living  
P.H. cold & coughs. 5 a v. 1st thing was the cough. - 'no gain of  
spite... no chills no severe sleeplessness. Coughs every  
day. runs agreeable. - Has no fever! 2 or 3 times a week better.  
T.O. 1/2 100 <sup>She strength good. often says</sup>  
but with expectation of cure & mucus is as good as any one

Looks pretty well - good color. Pulse is good - regular. Chest  
is fairly well built - a little less movement at left  
than at right apex. Left clavicle a little more  
marked. Rather a wide area of cardiac im-  
pulse. Features on the left side from clavicle to  
lower border of 5th rib. Very intense, tubular  
breathing. Large resonant rales with both in-  
and expiration. Numerous loud bubbling rales  
as low as 7th rib, practically all the way to the  
extreme edge of the lung in the axilla. Bubbling  
rales over the back chiefly with inspiration - heard  
below the angle of the scapula. at the extreme

base pleuric breathings. Exaggerated tactile fremitus. Diminished resonance - marked at the apex and as low as angle of scapula. Decided impairment of resonance even in the infrascapular region. Heart sounds are clear.

Percussion note is flat. There is no tympanitic quality at the apex in front and there is nowhere in the axilla a crester resonance. On palpation one gets as high as the second rib over the dull area the shock of both first and second sounds. The pulsation is very marked over the flat area in front. Abdomen is natural. No enlargement of liver or of spleen.

Dec. 5-07. The rales are not as large and bubbling. Resonance impaired over the whole lung. Flat in front and behind at the apex. Marked impairment and increased fremitus. Breathing is less intensely tubular. In front of the apex coarse resonant rales at the end of inspiration. In the lower lobe behind medium sized rales with both in and expiration. The right lung is perfectly free. No

cough in the left lung which has not some abnormal sounds. He has gained in weight and says his feverish spells are better and he feels in first class condition. ~~more~~ life and energy than he has had for six months.

*Inh. vac. in sp. m. m.*

May 22. Patient's main complaint now is cough at night with distress in the epigastrium. Shortness of breath has not been very distressing. There has been no haemoptysis. Weight is now 122. States that he has not had any fever for the last 2 months, temperature having been taken by thermometer. No night sweats. Expectoration much less abundant. Has had diarrhoea for 4 days. Looks fairly well. Pulse is of fair volume, regular, 116 to the minute. Moderate clubbing of finger tips. Temperature -  $100^{\circ}$

Thorax.- On <sup>R</sup> right side expands decidedly more than left. Considerable flattening above and below both clavicles, a trifle greater on left side.

Still a wide area of cardiac impulse.

Lungs.- Left side.- <sup>felt</sup> Vocal fremitus is well flattened throughout and exaggerated <sup>below</sup> clavicle. The percussion note is markedly impaired over the entire left front and throughout the entire axillary region. In the 1st and ~~in~~ particularly in the 2nd left there is very marked amphoric quality to the percussion note with definite cracked-pot resonance. Posteriorly the percussion note is felt just below the level of the spine of scapula~~x~~. Over the <sup>ax</sup> lower interscapula<sup>7</sup> region the resonance is good. Over the subscapula<sup>7</sup> there is no modified resonance. On auscultation breath sounds are enfeebled above clavicle with numerous <sup>a</sup> coarse moist rales. In the 1st, 2nd, and 3rd interspaces there is typical amphoric breathing. Resonant rales not heard at present. Marked pectoriloquy. The breath sounds throughout the axillary region are markedly enfeebled accompanied by coarse moist rales. The vesicular character of the breath sounds has entirely disappeared throughout the back. There is no tubular quality to the sounds, but everywhere <sup>a</sup> coarse moist rales are audible.

Right Lung.- Clear throughout on percussion and auscultation

with the exception of a few moist rales above clavicle and in I. i.s.

Heart.- Sounds everywhere clear. 2nd pulmonic accentuated.

Nov. 6.- Patient returns for advice as to where he should spend the winter. Says he feels stronger, coughing less. Has gained 5 pounds in weight since the last visit. Thinks he feels better in every way. Dyspnoea is his most distressing symptom.

Physical Exam.-

Left Lung.- Condition is very much the same as on last examination. The signs of the activity are now most marked in the 3rd interspace in anterior axillary line; on the whole not quite so marked as on last visit.

Right Lung.- There has undoubtedly been progress in the tuberculous involvement on right side. There is appreciable impairment of the percussion note as low as the 2nd rib, and above this level there are very numerous coarse rales on inspiration. Expiration slightly tubular. In the 1st and 2nd interspaces just at sternal margin the rales are unusually coarse and have a suggestive resonant quality. Expiration prolonged but not tubular in front. Physical signs practically the same over right supraspinous fossa. The apex of the lower right lobe seems to be involved. The breath sounds have a distinct tubular modification for a short distance below the level of the spine of the scapula. Patient has friends in Denver and in Texas. Advised to go to latter state.

*Died Dec. 1902.*

# Suspected tuberculosis

X 11.15.01

Dr. Putnam

114 E 38th St.  
N.Y.

~~XXXXXXXXXX~~ 40 119 E 64th. N.Y. ~~XXXXXXXXXX~~

'Cap and for fever', never during, a cold  
 fever, fever at 4 'high mal' 'excessive' case. Then no  
 fever until Roman fever in '86. set up well recently last  
 3. & 4 - seems to have shown under. There feversh  
 attack usually drag as about the ground. 2 y ago  
 and increase in spring and cold. Since his own. felt  
 only. Dr. no T. in am and in pm. 3 w after he was also  
 had + grew well again. <sup>no cough</sup> was such - no question I am. Dr. Putnam  
 said typhoid fever - not high 103°. called a week after at 7th  
 got well. called: T. acute typhoid. This in '89. no strong two same  
 and in autumn & winter not up to usual condition  
 & same time not A.C. This summer J. & a 'mal. germ' some  
 sort mild & dry. had slight fever. or found germ. at still  
 the could work felt only. middle of Oct. making a round of  
 inspect taken ill & laid up with malaria. had a chill & fever  
 102° at reg intervals. went to work in a week. 5 w ago felt only  
 gave up & had to rest one fever low. scraped pers. in am & in  
 even. 100-101° & went in for a week. nothing in blood. Dr. was  
 surprised. Dr. Delapied saw him. "said N.Y. fever" - rather rare than  
 he said. The fever was nothing like any for the fever. Then appeared  
 a soreness in rectum. & passed - persistent. Dr. Putnam said a fever  
 3 w ago today - had well. healed. soon got over no temp. 98.4°. was  
 for long time & with good appetite started to do work. Last Tuesday  
 had fever again 99+ inc. killed to say 1 day. 99 in am. 4 w  
 chills & T. 101°. Dr. sometimes a little sweat. F. go down by eve. In  
 the last attack could not. tried 4 w. but it was & element. came regularly  
 lasted a week. was not more since Tuesday. Saturday felt all right  
 only  
 F.H. 7. was not strong, had weak down & at 45 went abroad & while there

very careful. Died in '86. Had slight neck attack - my. Then

B<sub>2</sub>. S. B, d. Examined. -

1000 test 10 lbs. - mixed ab. T. B. in sec  
no syphilis & not a woman.

P.C. not a st. looking man, veins visible in face & ears.

Exam. pract. right nothing in lungs or heart, a few fine  
crackles at base of right lung. - heard - no lab. breathing. whole  
Aorta - lungs most carefully examined. no sign of pleur. mat.  
heart sounds clear. - ab. - normal. ~~gast.~~ liver & spleen not enlarged.  
no glandular enlargement. - F. u. l. u. has been led apparently.  
arteries - lit. sclerotic. int. aorta is not cut & aortic end  
is not missing. urine has been examined - clear.

The case is an interesting one - we have probably looked at  
the landmarks - the problem is an important change in  
the nature of the case. while there are about the case.  
The case is not of course.

Diabetes insipidus

Dr. Landis  
ii 7.02

Dr. Allen  
or Holt-

~~Diabetes insipidus~~ 35- Cincinnati Ohio

3.4 ago had heart pain. aching for minutes  
a week or so. came home felt badly. took food & one  
night had attack - knew nothing more. for months had heart  
Pain & a common cold in chest, both bones of speech, only  
4-5 hrs. not going there all night went home. 3.4 week  
after (with Phos. act.) went up & down. Over. night eyes became  
did not see night. or came him there & one for part of week  
seemed delirious. was out. 99. Rec. got up and dread full throat  
dry. thro-ly. then had the throat even since - nothing seems  
to go to it. I had the trouble - going in for 5 years. hardly  
from the chest & back & kidneys. no sugar. years 18-20 prob.  
in 24 hrs. Eyes not 4 with ophthalmos. 40-60 cgs. in 24  
no headache. not much after the attack. Before the attack

for 3 years had the headache of a ur. Positive that  
before the attack had no ur. in urine in the night.  
(Must drink cold things. Lapsus - grateful. Can go 1/2 night  
in day. at night. water 50-60 times to drink. Eye.  
Turning all the time - no movement without it  
with R.I. from +. Since then has called R.I. for urine  
to time. Stand with 30 oz in day. up to 4 and 150 drops.  
day.

(noting on a spine of back - felt body - went to bed (handkerchief)  
attack. occ 2 in after went to bed. handkerchief. R.I. day  
dry. I for a several months. After R.I. came this Gibber has water  
very much. was given in case. called Dr. Allen. Haven there for hours, breath  
highly - very much. few weeks before. I was up to normal. Urine  
for a week - called at random did not know what he was. no paralytic  
apparent.

(over)

in nervous man - married nine years. Father died of consumption. Mother lives and well. One brother died of consumption - one of diphtheria. Two uncles died suddenly of heart disease.

He looks a healthy man - weight 204. Good color. No sclerosis of the temporals. Tongue red and clean. Pupils are of medium size - react to light. Pulse is slow - regular - perfectly steady. No special sclerosis of the arteries. Osseal movements are perfect. Movements of facial muscles perfect. He perspires a good deal in summer - not especially in winter. Abdomen is full - natural. Liver not enlarged - edge of right lobe readily felt on deep inspiration - feels perfectly normal - upper limit of flatness on 4th. Little tenderness on deep pressure over the pancreas - no induration. Spleen is not palpable. Apex beat not visible - not palpable. No increase in area of cardiac flatness. Heart sounds are clear at apex & base. Murmur is clear - no pulsation in sternal notch. Station is good - stands on either leg. Knee jerks are slow - plus. Tactile sensation is perfect. Distinguishes heat & cold.

Wm. - Spg 1002 & 1003. My other

## Cerebral Les

Dr Ball.

II. 13.02

~~Dr. Ball's~~

48 Lock Haven Pa

a month ago

W. with tongue. In Wash. - at 6 p.m. dinner tongue  
 got shrivel - could not use it. could hardly understand. just  
 for a minute - at one with reliver 6 or 7. a then came again.  
 1/2 hr later - again. Went to hotel. was in bath room again  
 little in of palpable head dropped. ~~data~~ at one had sev attack  
 2 or 3 w ago. Last Sunday <sup>9<sup>th</sup></sup> am. at church. all at one began in one  
 frequent Twitch. a face drawn up in great side. I moved up a  
 was missing for 20-25" <sup>10<sup>th</sup></sup> ~~part of my~~ a ~~stomach~~ ~~trailing~~ ~~Heard~~ ~~up~~ ~~at~~  
 Saturday night a headache in back before. Pain awful. but  
 could get about. On Sunday before dark almost - crazy. Sleep-  
 better some in cat. did not fall - friend caught. troubled out  
 cheer - did not feel badly. Has been a little lighter headed. but  
 on bed Sunday. - all right Monday, no headache. one last night  
 in bed. F.H. Good.

P.H. V. h m. Cerebral disease. ~~the~~ One Dr. said 8y. another not. was  
 16 or 17th. have felt out, was under treatment. Dr Ball then 15 in  
 16 years V. h m. Married. 1 living. 1 dead. wife no more.  
 72 9 years Temperate. before start heavy drinker. was a painter.  
 from 10th year. not much past 5 years. no parietal chis. no blue line.  
 Face. nose & c all V. h. left pupil smaller than right. both read  
 very differently. to light well in vision. R. J. a little diminished  
 nothing in muscles of legs or arms. Little sinus in left side of head  
 sensation good in both sides. ~~Dr~~ Hearing a little better than  
 no trouble in ears.

R. J. M. x x c. d

~~Chyluria~~ 61. Henry Forest Glen Ind

C. & chyluria urine - began for 10 years. Dr. Saffer at home & Henry comes back in most cases. very much open 2 or 3 at a time once in twice for a month. never for 3-6 or 12 weeks. Never blood. never, never any cloudy sediment. has used 3-4 at 2nd Street, Washington 15 years. Report sent in 1831. 10 years. Born in Charles Co. Md. lived there till 15 or 20. was well when left Charleston. began here in N. H. no other trouble but this - nothing serious. good ap. good dig. no swelling of legs. no Pains frequent urine 5-6 times a day & once at night. clear in am but after eat - becomes milky. if eat all the time cloudy & up in am early.

Skare - thin man - young looking for his years. Arteries are sclerotic - tension not increased. abdomen looks natural. no swelling - no enlargement of the inguinal or subcutaneous glands. They can be felt on the left side as small shotty bodies. no enlargement of the scrotum. no swelling of the legs. no tumor. no distension of the veins of the abdomen or of the legs. penis is not enlarged. Liver is not enlarged. A. V. is in 5th - a little outside the nipple line. Aortic second is a little accentuated. knee jerks are ++. Dye grounds and discs are clear. hospitable friend.

abw.

irish servant.  
attacks of unconsciousness.

III 11.02

Dr W. H. Fairfax,  
Hague Va

~~to the~~ 30. misale. Va

W + ner. - attacks 4 of hurrying across the  
head & became unconscious. 1st one 24. ago. one in Oct. one  
last year. have got heavier. In last 3 weeks conv. 1st one did not  
fall. Felt, pain in neck first. pain in head, severe headache  
was spoken in child. In 5 years. 2 children. No really. Muscular  
largest child is 24 old. 2 children of 10 months past.

He went after the dog. was in room down a little & whistled him. He  
sniffed him again - looked pale - came up the walkway - up the  
porch - lay down on his back - became unconscious. pained & in  
a few moments face dark & purple like. & then, his eyes were  
set & jaw dropped. seemed like 10" to his wife - perfectly still  
when he came to - lay down breath as this could not breathe.  
began to struggle - could not be kept down - took 5 people to hold  
him trying 1 ft up - was unconscious. remained unconscious, for  
some time. 2nd attack playing with - over excited. before  
but in cold evening many running. Attack again with  
a pain in chest & winding pain like a screw. was got nervous.

Health looking man - good color - eyes a little in-  
jected - pupils equal - react to light. No involve-  
ment of the face or facial muscles. Looks a

to have a gentle wife. no work -

healthy man. Skin is clear. Pulse is rapid-  
regular - no sclerosis of the arteries. Knee  
joints are normal.

Heart - a.s. is in 5th - not forcible. Soft bruit  
at apex. Loud bruit at base - extends along the  
arteries. No thrill. No enlargement on trans-  
lucim. Aortic second is clear. Distinct thrill  
when the breath is forced out. Liver is  
not enlarged. Twelve years ago inflamma-  
tory pneumonia - another attack six or  
eight years ago.

*Richardson Cypripedium*

Dr. F. M. M.

111. 24.62

~~\_\_\_\_\_~~ 39 Chestnut Hill Boston

Had grippe 2, 7. ago severely. Dr. Bal deen. (Ches / Hdd)  
he said kidneys were aff. to no found. per. in chamber.  
upon test used a bit; fulness in abd. more at times  
feel a burn. what made think mother died of cystic  
degen of kidneys. p. in recd in 1882 Dr. Fitz & Dr. Trevelyan  
she was 50. had been in a st. Had good further success  
upon death. was not felt but they are large. Abd. is not  
p. v. v. a strong. enj' spots - taken for urine. / no pain  
in back - however. Dr. Tolson saw in Jan. for about  
days... Dr. Bal deen suggested a Dr. Fitz - that he had the  
intolerant kidneys. Patient usually and in good get  
was not passed blood often. only 2 times. Recently at  
Buckhurst. 10 days ago. for 2 days. about 5-6 oz. of  
was strong. slipped a bad & full - blood in urine at that  
time in bed 2 days feels a throbbing in head  
PC looks well & strong good color.

Robust, healthy looking man - weight about 145 stripped  
good color. Tongue clean. Pupils of medium size - react  
well to light and on accommodation. Superficial  
arteries sclerotic. Heart - a. b. in 4th, 5th, in and just  
inside the nipple - a little forcible - rather wide area  
of pulsation. Aortic second, palpable. Soft systolic at  
apex. Murring accentuated aortic second. Abdomen  
symmetrical - looks a little full in proportion to the  
chest. The costal border in the nipple line is lifted on

void is not enlarged - both lobes are palpable. - Both dies a clear.

both sides, a little bulging below the right costal border. The flank bulges on both sides. Girth of abdomen at navel - tant - 85 cm. - over level of ensiform 89 cm. From behind slight bulging in both flanks. When he stands up there is a marked prominence of the abdomen and a distinct evident discrepancy - particularly in the flanks. The lower ribs have been spread by the masses. On palpation both flanks are occupied by large masses. On the left side - the larger - extends fully 3 inches below level of navel. Not so much to be felt except on very deep pressure below the costal border in the nipple line. On manual palpation the mass can be lifted up and visibly pressed forward - irregularities can be distinctly felt. It is interesting that the descending colon runs over it - and can be felt as a cord. (he himself has noted it) that it can be moved from side to side. On the right side the mass is not so large. The colon is felt in front of it. There are several distinct nodular prominences - one can feel the definite hemispherical irregularities with the greatest ease. Both masses descend with inspiration. The liver is not enlarged - perhaps a little pushed up by the tumor. Thy.

# 165-3 Disease

to Sowers.  
a Makenberg.  
14-1602.

~~21~~ 31 165-3 Disease are. much etc.

Ent. glands. Tend to atrophy. No ent glands

ill with Dec. no sup. . not doing since last visit.  
Dec. 9. when 10 days old. above in ear - punched  
- pierced. 3 others. 3 or 4 w. T. 105°. Eng. all with  
hairs. Fever on a off all thru the winter. after. appears  
to be well. Go 101° - none since Feb. 1st.

March 12 next found. till April 3rd. 2 o'clock. Makenberg.  
Summer at N.E. part. active & well. Drunken. per  
did. Oct. 1st. bad cold - bronchitis. 28th Oct. neuritis in  
right leg. pain & stiffness - in bed 1 mos. & in after  
month. Now 1st. had a kernel under the left axilla  
swelling & tender. in neck. 1st. at left axilla. Still  
right. In Dec. while left breast seemed swollen. 8th Jan  
swollen above the collar bone - here over 2nd. not  
near the other side. none in groin. not sure. Cerebr.  
app. in the arm & severe in heart. 3 or 4. very much  
swollen. a brownish color. at least in w. in 7 mos. Feb.  
10th imp. Sw in neck large at Sunday. Large in w. in 7 mos.

Looks fairly well - well nourished. A little red-  
ness of the throat & marked swelling of  
tonsils. On left side of neck no enlargement.  
No enlargement of thyroid or enlarge-  
ment above right clavicle. On the left side no

enlargement in inframamillary or at angle of jaw.  
Enlargement of glands at both anterior and posterior  
triangles. They are free movable - not attached  
to the skin - have not coalesced specially. The most  
prominent one is at the highest point of sternum  
crease. The one above the clavicle overstates the  
contour of the bone. Infracavicular chain en-  
larged. In the axilla none enlarged. One or two  
high up under the pectoral is swelling or indura-  
tion in the right breast. No nodules. No sub-  
sternum. Note a little higher situated  
at left apex - which may be from the infiltration  
of the glands. Occasional chinking note at intra-  
axillary region. No tubular openings - no tri-  
circular breathing a little higher situated and tu-  
bular at left apex. Pulse is good. Heart sounds  
are clear. Cerebrum is not enlarged. No enlarge-  
ment of glands in axilla.

4-21-02. Temp. for 5 days ranged from 98.3° in the morning to  
100.0° in the eve. - and once last evening 101°. He had had  
an attack of the swelling on each 3 or 4 days and a feeling  
of fulness and distress. Various fulness in comparison

with the last examination (15th) over supra-clavicular region. There is fullness over the upper sectoral fold. Glands beneath the pectoral are distinctly enlarged. In the axilla there are not enlarged.

Sept. 24th, 1902. On superficial inspection no glands visible; no trace of enlarged glands in the axilla. One just beneath the clavicle. In the right axilla perfectly clear. Manubrium is perfectly clear. No glands palpable in the trochae. No enlargement of the glands above Poupart's ligament.

Dec. 5th, 1902. The gland behind the scar and the one just below the clavicle have increased in size since last note. Nothing to be felt above the sternal notch. Manubrium is resonant, resonant under the left clavicle. Air enters equally in the upper bronchus on both sides. No pectoriloquy. Behind no difference between the two bronchi. A few wheezing rales at apices, more at left than at right. No increased fremitus.

Sept 25- 1903. recent big bunch below rt clavicle... coming indefinite & infiltrated. none in axilla. Small ones above C. clear in upper ends of lungs.

Sputum - repeated examinations negative for tubercle bacilli.

Blood - Apr. 21. 1902. Hb. 68%. r.b.c. 5,112,000. w.b.c. 15,000.

Diff. P. 84%. L.M. 6%. L.M. rT. 8%. Ea. 2%

Oct. 10. 1903. Hb. 60%. r.b.c. 4,800,000. w.b.c. 29,000

Diff. P. 95%. S.M. 1.7%. L.M. rT. 3.2%. Ea. 2%

Metazellen 3%, no nucleated reds.

July 22. 1922. This was a very remarkable case - She had many operations and lived 10 or 12 years from the time of onset.

Thomas de'Gree

---

~~Brain Tumour~~ 27 Atlantic City, N.Y. Hotel Traymore

double vision 6 mos. - 1 1/2 - 2 y. ago. no ocular muscles came in as only when 3d empty. center there all at once - 2 - 4 weeks - intervals free. Had an attack the one not much long headache when there. H. not rev. as a rule. called more. rather more free. Prior no headache. more a by. Headache & rev. preceded the double vision. With the D. V. felt numb in at hand & H. V. wh. for a time more appear some of marked cases of an condition wh. was with a movement of hurried - still it lasts - not increased, nor the numbness. Same duration. weight = gained a little. (47). a little off on mouth. a little misplacing of words. no watching? or as in last. drag foot a little. later symptoms more well. in felt quite decided act of respiration in left side of face. - in forehead - rumpled left side peeled up - in last two or three a little numbness. at times a prickly appearance on face has shot for a moment or two. in upper two in roof of mouth. eye not stared shot. Pulse has been normal. Dr S. has seen since. Inf of optics never subdued severely. 7 mos ago saw him & he said good condition a month later he said "all off". double vision. after inf had come in. Came in after the at last free. Mother died of consumption.

Fairly healthy looking man. Slight strabismus. General facial expression good. Movements of the ocular muscles seem perfect. Slight ast in the right eye, but no actual paralysis of any one of the mus-

cles. Good movements in the temporal on the left side. Movement of the facial muscles perfect. No anesthesia of the face. Vision is good, equal on the two sides. Pulse is equal. Stereognostic sense good in both hands. Knee jerks are normal. Station is good. No difficulty whatever in locomotion. No homophobia. Absence of optic neuritis. No macular degeneration. Operated on Left Eye by Dr. C. J. Doster.

Remunerable  
Petit med.

XII. 10.02,

38

~~Forest Rd. Owl Park Aug-~~

a species of fancying shell - sub-convex  
has not seen but common. Saw 7 seen 1 at one  
had seen asleep - did not know his wife - could not  
bring him back to his identity - 3 for fancying did not  
know anything - eyes were open, able to talk 7-10-15  
did not answer at all. just saw H. next one 2 weeks  
a shorter one. Has had 1 in all, all able - 1 after  
some while talking then he got in throat little & does  
not speak 10-15" - can walk in it, not does not  
know. Changes in color white. Does not know anything  
Has not a beginning a new. in stomach, a new.  
Knew when he comes at the attack. Had the in hand  
Knew it in it & then when he came to himself he  
was in the car & must have taken a ride of 75" at  
least. Ending - a red red dust. No head-ache.  
well otherwise. Has had no vision months. Exam. of all  
& has had loss of sleep &  
7th. 7. was born in 75" - red, petit med. - direct family.  
No. no & well. 6 63 r. & S. 1 S. is delicate, nerv. & stomachic  
1 who is nervous.

Healthy looking man; good color; tongue clean. Pupils are equal,  
a little dilated, react well to light. Pulse is regular, 12. Vaso-

R br. 8.5 x r. 6. d.

Previous diagnosis - new onset of epilepsy

\*  
motor reaction is active. heart sounds are clear at apex and base.  
stomach is not dilated; tympany is a little dist. Liver not enlarged  
Spleen not enlarged.

X 30.03

time now every two weeks, greater  
less. increasing - no counts: but will fall over  
to work. but at his business as a lawyer  
he was very busy - and the life in the all - the time  
all the night.

V. rem case. Miss Frank 1 mile

Alch. Headis

XII. 1912

~~46~~ 46 ~~7-25~~ (w) Sunday the 25th

c lame - left leg, mid of aug. Noted  
swelling, in ankle, from knee. weakness legs, lower  
down & fall in. Can not get up slope of dragging. Has to pull  
up. Weather affected. No pain. None anything better to  
getting better. No much better. No appetite. Has fallen away.  
P.H. V. h. m. cigarette smoker. all the time. ~~10~~ 10. V.  
had earlier, strain & worry. began to drink, at 23. seen.  
fully... very low wife says.

To 26/12/12

He has not a specific facies. Florid facies. He walks with a waddling,  
staggering gait, left leg more than right; stands on his heels  
with difficulty; stands on his toes fairly well. Knee jerk slightly  
present on right side. Slight incoordination of the hands. Decid-  
ed weakness in the flexors of the left leg. Slight stasis as the  
feet are held down; nails are much congested. Fair grip in the

right hand; not so strong in the left. Pupils are equal, react to light. Tongue is furled. Abdomen--liver can be felt two finger's breadth below the costal border, hard. Spleen is not palpable. ~~Heart~~ Heart sounds are clear at a. and b. Pulse is regular; slight scler-osis of the vessels. Slight fine tremor of the fingers. No wasting of the legs.

"Say goodness"

1.31.03

March 27.

27 ago. Dr. at Nagasaki, Dr. Rochester & Ed  
Cushing <sup>said</sup> had been cough, then a fever. Every night  
a night silent. not much sleep. was much run down &  
anemic. Sent you at Hot Springs about int. short.  
Pulchra left us last year <sup>Nov 1901</sup> had all little angina pectoris  
Had some heart trouble - ~~was not~~ <sup>was not</sup> ~~rested~~ <sup>rested</sup> did not do properly  
2 all the at Nagasaki. Dr. Heuermann. 2 1/2 mos. 20 baths.  
ran down. sent you to Paris. Got back Dec 6th  
No sleep. of sleep. Very so some & heavy in mid. st.  
Left hand swelled at knee & dis. & sharp pain. had to  
have a splint. left foot swollen. could not wear a shoe.  
3 or 4 days. left arm felt asleep.

Respiration is equal on the two sides: clear on percussion at  
both apices. Moist rales in lower at both apices in repose; no  
expiration of expiration. At the extreme apex on the left side  
no expiration like piping with expiration. A. S. is in abd. in  
normal situation, clearly percussible action at the umb. & little beyond  
the n. s. slight pulsation in the lower sternum. Upper limit of  
S. F. on lth. 10. Not as high as on rth. lth. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100. 101. 102. 103. 104. 105. 106. 107. 108. 109. 110. 111. 112. 113. 114. 115. 116. 117. 118. 119. 120. 121. 122. 123. 124. 125. 126. 127. 128. 129. 130. 131. 132. 133. 134. 135. 136. 137. 138. 139. 140. 141. 142. 143. 144. 145. 146. 147. 148. 149. 150. 151. 152. 153. 154. 155. 156. 157. 158. 159. 160. 161. 162. 163. 164. 165. 166. 167. 168. 169. 170. 171. 172. 173. 174. 175. 176. 177. 178. 179. 180. 181. 182. 183. 184. 185. 186. 187. 188. 189. 190. 191. 192. 193. 194. 195. 196. 197. 198. 199. 200. 201. 202. 203. 204. 205. 206. 207. 208. 209. 210. 211. 212. 213. 214. 215. 216. 217. 218. 219. 220. 221. 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2014. 2015. 2016. 2017. 2018. 2019. 2020. 2021. 2022. 2023. 2024. 2025. 2026. 2027. 2028. 2029. 2030. 2031. 2032. 2033. 2034. 2035. 2036. 2037. 2038. 2039. 2040. 2041. 2042. 2043. 2044. 2045. 2046. 2047. 2048. 2049. 2050. 2051. 2052. 2053. 2054. 2055. 2056. 2057. 2058. 2059. 2060. 2061. 2062. 2063. 2064. 2065. 2066. 2067. 2068. 2069. 2070. 2071. 2072. 2073. 2074. 2075. 2076. 2077. 2078. 2079. 2080. 2081. 2082. 2083. 2084. 2085. 2086. 2087. 2088. 2089. 2090. 2091. 2092. 2093. 2094. 2095. 2096. 2097. 2098. 2099. 2100. 2101. 2102. 2103. 2104. 2105. 2106. 2107. 2108. 2109. 2110. 2111. 2112. 2113. 2114. 2115. 2116. 2117. 2118. 2119. 2120. 2121. 2122. 2123. 2124. 2125. 2126. 2127. 2128. 2129. 2130. 2131. 2132. 2133. 2134. 2135. 2136. 2137. 2138. 2139. 2140. 2141. 2142. 2143. 2144. 2145. 2146. 2147. 2148. 2149. 2150. 2151. 2152. 2153. 2154. 2155. 2156. 2157. 2158. 2159. 2160. 2161.

out at the apex of the apex beat. At apex first and second sounds are well heard: first is a little murmured, but no distinct systolic bruit. Absentation of systolic second. A little soft bruit along the left sternal border. In r. v. bruit is more distinct at the apex. Slight irregularity. Pulse is regular, of good tension; no sclerosis of the artery. Outer surface of left hand a little swollen; no redness. Joint is cool; no anæmia. After exertion a little distant wave at the apex.

Series III abs.  
Case I

Anemia splenic.

II 11.03  
Dr Stocklin

~~Mammals~~

41

~~12.03.03~~

Buffalo

C of anemia, dis. mid of Dec. note dry throat  
& lips & mouth, imperfect eating the least exhaustion  
no inc. in urine. weather no loss of weight. Imp. locality.

In Aug. without weather a 'felt sick'. Did not say anemia  
could include anything reprob. what from all along the line. ~~Still~~  
ap. poor. needs rep. not well for 2 y. his wife says. down. lost.  
note. . . v. h. winter. & Keen Campbell.

T. H. good. F. 73 - green but at 77. M. d. ne br. B. S. W. S.  
P. H. not near 4. Maud. at 0. another at 11 & at 21. a more or less  
trouble with liver ever since. Deep purring at her all the time.  
Temp - man. Tob. mud. K. well other. no 83 hits, or gun.  
1st att of Jaundice at 6. was ill many weeks. 2nd at 11.  
was quite ill 3-4 weeks. deeply jaundiced. y. at all night.  
cannot say in case perfectly well along & yet to be a little yellow.  
3rd ill. at 22 an acute attack. lasted 10 days. went rapidly.  
Mained 22 years. Has always his wife say been inclined  
to jaundice - at 5 slight attacks 2 eggs a little yellow. None  
high colored.

The spleen was enlarged much more than it is now. Anemia  
has reduced it.  
no pigmentation.

Takes the anemia. dog over at it's hands. Fodder.

He looks a little pale; skin is dry; a few little blotches over the face; a little stiffness and oedema of the eyelids (has been taking arsenic and iodide of mercury); tongue clean. There is only a faintest yellow of face; a little yellowness and infiltration of the conjunctivas. General surface of the skin a little yellow, more marked on the trunk than on the face. Pulse is regular, steady, good tension; no special scleroses. Abdomen is soft. Left hypochondrium--spleen is enlarged, can be readily felt, very movable; post-erior border can be felt in the flank. It can be tilted forward; notch is not palpable. Spleen reaches just to the level of the anterior axilla and to the left exactly 6 cm. from middle of navel. Liver--edge is just palpable on a deepest inspiration, slips over the finger, does not feel especially hard; right lobe not enlarged; upper third of liver flattened against 11th and 12th, middle third on 12th, lower third on 13th and 14th; right lobe on 11th. No splenic enlargement. A. B. is 140, a little raised out; soft spot cranial base; should show at a. and b. Tongue very clean. No retinal haemorrhages.

Neurosthenia

V. 4. 03

Atlas out of place!

see letter.

230 w 44 1/2 St.

Since 15-16 years. headaches. up to 14 it had  
believed attacks & Ch. cramps & headaches. M? no bow or  
under & attacks. 7. had head troubles. She outgrew the latter  
attacks. Ch. of head. sense of pressure & weight on top. now  
more def. at base. hard to concentrate. At college. could hardly  
over and it. This summer had a married. Had to lay out  
in summer. Then taught for 2 years. Then had spells of depression  
studied very often. For nearly 2 years better. in summer  
high altitude. was very much. no cure. At present. Improved  
for the time - summer weight. no decline. but a sum or  
begin to have trouble when people get bad again. Last spring was in  
the edge of melancholia. & the fear of it worried her. This spring  
not so well. Generally this winter in N.Y. easy life. no strain. seeing  
a few people. when unwell. about. & exhausted. no & am much.  
of blood. chilly all the time. Occasionally, more than usual. but  
never very heated. no depression. & is cheerful except when  
the head bad. sometimes not quite clear in head. This  
literally well. never. as rule up & day good. & when tired.  
Pain in ball of left big toe. not more at night. no redness.  
Ear der. slight. eye ball not itched. no swimming. no itching foot -  
no gout in family. trouble with & hands. in arm. better in  
eye. Started early. less coffee or wine. cannot go to church.  
does not mind a crowd in other place. Then had a head of my  
about alone. is sickly at times. is a bit apprehensive.  
To write about the urine.

353 Broadway,

~~Massachusetts~~, Nov. 2, 1908.

My dear Dr. Isler:

When I consulted you in May, you were kind enough to ask me to write you in the fall "how the fight went on." That in itself has been very consoling, — your recognition that it was a fight.

Well, I took a very thorough course of Bland's pills, and I think there is some improvement in the matter of anaemia, though I have not yet succeeded in getting the blood tested. But the

head trouble has undoubtedly  
been worse. I spent the summer  
at the seashore, on the Maine  
coast and at Grand Manan,  
blessed island - which gives you  
all the advantages of a sea-voyage  
with all the comforts of home. I  
lived outdoors very largely, ate  
good food with a good appetite, and  
was very hygienic generally; but  
it was really a tough summer.  
A constant struggle with insom-  
nia, intervals of pretty serious  
depression, and such sense of  
strain and confusion in the head!  
I wrote my letters and read a  
little, but with great difficulty.

I came here about a month ago.

The friend with whom I am stay-  
ing has been helped wonderfully -  
by osteopathy, and I have begun  
taking treatments of her man. I  
understand that you will not  
approve of this, but something  
had to be done, and I tried it as  
a last resort. This man is not  
an ignoramus, but a registered  
physician of this state, besides  
being a college graduate and a  
gentleman. His name is Dr.  
Richard D. Ellis, and he is prac-  
tising in Boston. What he says  
is at least interesting. He finds  
that my atlas is out of place,  
and that consequently there is  
not only constant irritation of

The medulla and sympathetic nervous trouble, but so much pressure on the vertebral artery as to interfere seriously with the circulation in the brain. He judges that this condition is of many years' standing, if not congenital. Two other osteopaths agree with him in this diagnosis, and I must say I believe it, because it corresponds so exactly with my experience, and explains all my difficulties so naturally.

Dr. Ellis believes that in five or six months he can work the atlas back into its normal position, and that in a few months after that the brain should be working.

nowadays. To my mind the degree of relief and mental activity which can be obtained is wholly unimproved; but I mean to give him every opportunity to make a thorough trial; and, just having the hope is doing me great goods.

Will you pardon me for saying that my one interview with you made me feel as if you were a friend? I suppose that is part of what it means to be a great physician. And my confidence in your broad-mindedness makes me feel sure that you will be generously interested in this case. I cannot help feeling

that if I should get help in this way it might suggest the employment of this method in other cases, and so have results important enough to make me rejoice to have been permitted the long distress. Perhaps this is "too precious", but I trust you will forgive it, and also this long letter. I shall take the liberty by and by of sending you word how it all turns out, — if it does turn out.

May I just add that your advice about comforting myself with poetry helped me through some of the hardest places this summer?

I hope you had a rich and

delightful summer, and I am  
always

Sincerely and gratefully yours,

~~Wm. W. W.~~

8 Morning.

~~5-3. 17. E 120 St.~~

no shock at onset 3 y ago. V. h work ing. no syphilis.  
 not much alcohol. no watch. some marked walking. did not look any  
 better. some weakness of legs. more noticeable. naturally right.  
 no hered. nothing in her or father. marked her change in character but  
 not definite. no headache this wife. began 18 years. at Prof. R. in 1870  
 began to be. 3 weeks in bed. no recurrence. 4 y ago beginning pain  
 in joints. leg. not good till lately. 2 ft. joints. 12 in  
 15. years. F.H. no other ven trouble in family.  
 1st. thing. single name. had jumped for water. 3 y ago, p. 1/2 by  
 motion. deeper to. then at the center. a more walking slowly  
 of the center here. used to hold a good deal. one finger felt.  
 slurred. noticed it only at intervals. began to affect the writing  
 named the writing. 1 y ago noticed in the leg. a numb sensation  
 slow. along. center in the leg. 1/2 through. lost in weight. 185  
 now 170 & perfectly content. looking. thinner in some places.  
 & pain. feel it a little. in pain in my right arm. Bowels  
 regular. Does care now - 3 or 4 with by hand. follows  
 early. carrying a salted hand gets tired. from the right hand.  
 no other man & down sleep. Sleep well. Fainted sleeping 5  
 years ago. then on left side only. continued for 2 years. disordered  
 & a few other the former appeared. no other certain thing.  
 no other strain. in young. no stroke.

The absence of swelling in the left arm is remarkable.

1. Melius.

Healthy looking man; good color; good physique; height 5 feet 10 1/2 inches. Face is not Parkinsonian. Expression is perfectly natural. Pupils--left perhaps a trifle wider than the right; both react well to light and on accommodation. No lateral tremor of the head. No feeling of contraction in the right sterno-cleido. There is no characteristic Parkinsonian attitude. General musculature is good. Left hand and arm unaffected; right hand and arm affected, the characteristic clonic flexion of the fingers. Thumb very slightly affected. A good deal of volitional control over it, but not absolute. It is interesting to note the changes in the intensity of the movements, according to the position of the hand. When put across his body the motion is aggravated, held up it is diminished, and extended straight at night it is much relieved. While making any voluntary effort, as in taking off his shoes and stockings there is a remarkable diminution in the tremor. Skin reflexes are normal in the feet; no Babinski's reflex. The adductor is natural looking. No enlargement of the liver or of the spleen. Apex beat is palpable in 5th. Soft apex systolic in recumbent posture. Pulse is regular; arteries are palpable. Knee jerks are a little plus. Grasp is pretty good in both hands. Both discs look normal; an atrophic patch just below the disc; no tortuosities in the artery.

5051

2 years

50 New York. Aug.

[illegible]

and myot when sitting. She has a very short her entire course  
of 42. After getting interested heart starts up.  
attack was lasted 5 hrs. - water very - & pale. - & a shocky  
that & face gets scarlet & flushed.

1. To rest abt. & get away from down & so on.  
rest in arm
2. The flatulent dyspepsia.
3. The bleeding.

Healthy looking woman; scoliodont eyes are clear; no anorexia. no  
cyanosis of the lips or of the cheeks or of the fingers. The pulse  
tension is good. Visible pulsation in the radials. Impulse is full,  
easily compressed; artery not specially sclerotic; no sclerosis of  
temporals. Heard sounds are loud and clear; first is flapping and  
valvular. Towards the apex it is unusually flapping. Over the apex  
region a little tender. No murmur at apex; a little suggestion of an  
echoing rumble in diastole. The thyroid is not enlarged. The upper  
limit of cardiac fistula is 4th. Manutrium is clear. There is a  
great deal of flatulent distension of both stomach and colon. During  
the examination in r. p. the heart action not rapid; no tachycardia;  
no gallop rhythm. Lungs are clear; in occasional piping note on deep ins-  
piration.

Saw Dr. Frankel R. 10.04. Dr. B. & I. 1. 2. all after - 1. 27  
stop. with a flop.

II-10-24. The look is well; color is good; tongue is clean. Pupils react well to light. The pulse is regular, 80; artery not sclerotic; no occasional beats. The temporal arteries are not sclerotic. The vessels are not palpable. Heart sounds are clear at the base. Aortic second is ringing. Clear at apex; no murmur. In constant position a few bits of fibrin on lower border of L.R. No fibrin over umbilicus. Right border of heart bulges just at the mid-sternal line. Second heart is transmitted loudly into the arteries. Edge of liver is just palpable.

neurasthenia.

X. 22. 03

W. Clarke  
Exington.

~~W. Clarke~~ 31. 9. 1903 Cath. St. Exington Ky

c. ner. Fr 10 y. old neuro. worked last 7-  
get in at 21. broke down in college. Did too much.  
not strong to school. all - lost most of brain in bed  
rest of time in life. Better now - for a time was an  
invalid. Then rest cure, but have no better, and have  
better in health, but nausea for a year after it from  
the forced feeding gained 15 lbs. Best weight, after this  
106. now 92 1/2! 84 the usual. Gained this summer  
fairly fast. Aunt says yes very. She says well, when  
sleepless. So I tried. Then sometimes very "dyspeptic"  
ner. nausea & vomiting a screaming in train is  
never without it - a confusion, everything going wrong and  
+ "Kiss your an' heart". As in self. very. Doubtless  
call up all that, and in the night, could not sleep the  
7. 14. + gave very ner. in the night. really very bad  
to it as child. Lately much day trouble, but is now.  
No headache, but cannot do anything. I suggest  
that all to come, blue.

Pale del. nothing. Went clean - nothing in mind, no  
and in power. nothing to do with in appearance. looking of a  
highly nervous & broken down just. V. H. made - well.

To do a retail business -

1) Retail business.

2) food. (3) fresh air. (4)

Myxæderus

5 Warble

X 1. 27.05

(20-40 hairs)

Sherran 1840

Wash. D.C.

~~Myxæderus~~ 5-1; Quebec Can.

c well till July 1 d. fishing. all day. had  
difficulties in head & shortly after. diff in limbs with get heavy.  
& in open had a worst turn - heart intermitting. did  
not faint - occ. recur. after that 2 w. saw Campbell  
nothing organic, none clear. nothing matter. Wind fishing  
face swollen round eyes - feet cold & body cold. & hands  
swollen a little - body not swollen. - face a little swollen  
esp about the eyes. Plus was 15 aug. went out a day,  
under some. up & down. Diff to go round. no strength.  
limbs little used. - tired at once. dragging round with him  
at last with a few turns of hands. Came south last Sunday  
some days feet well clear. body. some ex. 2 w ago. nothing  
in T. not sleep in bed without hot water bottle at feet.  
so horribly cold. & and are swollen. Skin has  
got dry & hard. the arm is sore & diff in pulling collar been  
the fingers are numb. Color has changed. his nails  
no sinking.

Height 5 feet, 11 inches. - feet weight 200 pounds; now 180. his  
face looks a little sallow and yellow. the eyelids are puffy.  
there is a little swelling and congested condition of the eyelids.

and of the skin above. The face looks a little swollen and a very  
waxy, yellowish look. The tongue is clean. No special swelling of  
the lips. The skin below a little dry and hard. The hands are pre-  
specially dry, a little swollen, and they are distinctly swollen. Head  
is worked, in a way that is quite unusual he says. He thinks the  
right ear is a little swollen. The general surface of the skin of  
the body is unchanged, except that it is a little dry. The pad above  
the left axilla larger than above the right. His speech is husky.  
Stationing in front of the trachea; no thyroid gland to be felt. The  
skin of the trunk is dry and hard. Spine is just palpable.  
Edge of liver just palpable. No enlargement of the lymphatic glands.  
His expression is slow.

Dec. 16th, 1903. Remarkable change in his appearance. All the  
infiltration has gone from the face and eyes. He still looks a  
little sallow. The dry appearance has gone from the face. Hands  
are not nearly so dry; the conjunctivae are free from them. The stom-  
ach is very much out of order. Appetite is clean. Pulse has gone from  
50 and 55 to 82.

July 20, 1911. I kept in touch with this man often. He had to take  
thyroid gland extract fairly steadily. With it he was perfectly well.  
He died of pneumonia about 1918.

Thomas McCrae

Mitral & aortic valvulitis  
Rheumatic

X 12-41

~~June 25~~ 25 - Our ham re

C of ~~the~~ Rh. about 5-6 yrs. back in legs &  
legs - all over mud in hips. in bed. on 1st 3 days down get  
over it. no swelling no redness. Weather did not affect  
had it even 15-20 would get so bad that I'd get  
one floor or another. more in hip. has been without it  
from 27. till last May. then down & it. 12 weeks. last am  
felt some joints red. Friday Rh. rec'd as left until swollen  
but not sore. up. can't use in back. on up & down  
& suffered again for 2 days. no fever. no sweat. no swelling  
after 3 or 4 days. in back stayed all June 1877. not at  
in month. then left hip. left up still sore of both legs  
has had time with it. in sleep only. very sore in back. no  
two chest, over part. Pain comes in. - no palpable with it.  
Gib. many he says, & many in same - as Dr. Carr. gave him  
clot - left it. said T. came in. & some other. in  
not at day. but up when I was down at night.

to Tonsillitis

no looks realty. tongue is clean. no enlargement or soreness  
of the smaller joints. Nothing in the elbows, wrists or shoul-  
ders. Nothing in the neck. There is a little inequality in the

hip line. The outline of the left hip is decidedly fuller than the right. In the erect posture there is no special soreness. Motion now is not painful at all. In the recumbent posture there is less difference noticed. A little sensitiveness over the hip just behind the greater trochanter. Just a remnant left of the trouble in the hip. Apex beat is in 5th, ~~just~~ inside the nipple line. Heart's action is a little irregular. Soft mitral bruit, more marked in the recumbent than in the erect posture, increased in intensity along the left sternal margin. Rough aortic direct bruit propagated into vessels of the neck; no diastolic even after holding the breath and on exertion. In the erect posture the apex beat is felt directly over the nipple; its maximum is in 5th. inside the nipple line. Absence of carinae flatness on upper border of - 4th. Liver is not enlarged.

July 20<sup>th</sup> 1922. This patient died in May 1922. from some acute disease - probably pneumonia - I saw him - not professionally - in August 1921. when he seemed well to ordinary inspection. He had carried on a very large business for many years before his death.

Thomas de'Gree

DR. A. E. WOEHNERT,

HOURS: 10 TO 12.- 436 FRANKLIN STREET.

1 TO 3.- 155 ALLEN STREET.

## ANALYSIS OF BLOOD.

Name L. B. Clark Date July 13/1903  
Macroscopic Appearance Pale  
Fibrin decreased Coag. Short  
Specific Gravity 1.057 Haemoglobin 52%  
Erythrocytes 2812800 Leucocytes 8933  
Ratio, leucocytes to erythrocytes 1-314

### ERYTHROCYTES.

Normocytes Pale Microcytes Many present  
Macrocytes Ind. present Poikilocytes Con. present  
Schistocytes Absent Normoblasts 20 to 25 per mil  
Microblasts Absent Megaloblasts Absent  
Blood plates decreased

### LEUCOCYTES.

Lymphocytes, small 24.25%  
Lymphocytes, large 10.75%  
Polymorphonuclear Neutrophils 64.50%  
Eosinophiles .25%  
Myelocytes —  
Basophiles .25%  
Myelocytic Eosinophiles —

### PARASITES

Plasmodium Malariae —

Kindly return

W. E. Woehnert

Feb 12, 1903

Mr. Clark - Blood Count

The drop as it flows from the ear is of faint, sand color; rather fluid in consistency; fractures blades freely.

Fresh Specimen - Rds about of normal diameter; no special variation in size or poikilocytosis; not possibly a large fish. Numerous ... No apparent leucocytosis.

Blood Count.

Rds - 686,000 ???

Whites - 4,000

Hb - 62%

N.B. It was 1 hour after taking the blood that I was able to make the count. It was then observed that there were numerous blood shadows indicating that there had been an haemolysis of the red cells. I noticed that on taking the specimen with Tolson's Soln. that it formed immediately a peculiar lathery mixture. As this Tolson Soln. has always before perfectly before, it suggested that there might be an increased vulnerability of the cells. This was rather confirmed by the dense lugging of the plasma between the cells in the stained

Specimen.

I consequently do not feel that the wet count is correct and if it were possible for the patient to remain I would like to make another count with a fresh Torsion this afternoon & send let you have the ~~result~~ report at once.

Differential Count -

Small Monos - 20.0 %

Large " - 9.1 %

Transitionals - 5.0 %

Polymorphos - 62.5 %

Eosinophiles - 3.3 %

Mas'zellen - 0.0 %

Myelocytes - 0.0 %

No nucleated red seen. Marked staining of the plasma.

Oct 7 17

Dear Dr Osler

Mr Black came in again for a blood count this afternoon.

The result was as follows

R.B.Cs	-	924,000
W.B.C	-	6,000
Hb	-	61%

The red count is still surprisingly low. With the absence of the morphological features of pernicious anaemia, particularly the absence of numerous macrocytes, I am at a loss to explain the high color index. I had no reason to suspect any fault in the technique this afternoon. The red count yesterday was 686,000 + Hb 62%. There was undoubtedly some destruction of reds yesterday owing to delay in count.

D B Fulcher

22081273

1002.4.

*[Faint handwritten notes at the bottom of the page]*

Feb 13, 1903

Langdon B. Clark - Urine Exam<sup>n</sup>

I Morning - very light color; turbid (urates); abundant  
precipitate of amorphous urates.

ac; 1023

No albumin, Sugar or diazo.

Microscopically - no casts; amorphous urates.

II. Evening - very deep reddish brown; one rarely sees  
deeper color. no sediment

ac; 1030.

No albumin, sugar or diazo

Microscopically no casts; few cylindroids

no urates.

D B Fletcher

# Parasthenic neuralgia

1.40 \$  
or Whiting

~~Parasthenic~~ 31 ~~Parasthenic~~ Spring St Philadelphia Pa

29. Sept. Pain in knee & above & to the  
hip. Feb. 1802 in 33 as sup't of Sc. R.C. had  
<sup>an Syphilis</sup> strike when came on with the summer night  
& day & one night after 4 hrs. that he woke in knee  
first in the centre - laid down in bed & passed away  
next cannot tell. but came on in intermission, at least  
knee not swollen & it is very soft & attack. Not  
red. Now was attacks me in p.m. & even could  
after 6 w. of intermission. Now must for a year  
keep ankle - worse at night. Aspirin. & anti-rhum  
Alb. & under. Syden salvered pain unbearable  
I - say shows nothing. of knee & last Spring Decipher  
went west. to Cal. did not improve. & was left. Last  
Jan in Phila in m.p. rest on 2 weeks - got worse.  
& since wasting the muscles. Pains severe p.m. & night  
Has tried everything in way of elec. mass &

Healthy looking man; good color; has lost about twenty pounds  
in weight. Pupils are equal. Visual acuity is good. No  
tenderness in neck. All joints. Slight rigidity of the spine.

is a little rapid. Body is a little thin; rear joint below the superior superior spine on right side where the external osseous nerve has been cut, without any benefit. Pain now is chiefly through the lower end of the , (left) leg; when very severe whole leg is affected, and even so far as the arm. A little swelling of the thigh, of the superior muscles and the various inter-  
mus. This swelling and swelling is always perceptible. No special difference in the clinical region. The right leg, which, measures 14 1/2, right; left 14. There is no swelling in the right leg. No swelling of the arm. The joints are well preserved. A little swelling of the arm is the swelling of the right arm. There is no pain in the  
vere he walks with a limp.



J. D. Mancher  
Arlington Hotel.  
Toronto

Medical Library Historical  
Journal

Healthy looking man; good color; good physique. His face looks natural; all the movements of the facial muscles perfect. Moustaches and beard are brown. The pupils are equal, react to light and to accommodation; there is no squint. When he rotates his head there is an undoubted elevation at the back. Head itself is well formed; no arterial bulging; no distension of the veins. The carotids are large. Tendency to be full on deep pressure in the occipital region. No grating felt on passive motion of the head. No

limitation of the forward movement. A little sore on both sides down the course of the tracheas. Dynamometer right hand 70, left hand about the same. Hearing is practically normal. Knee jerks are normal; left perhaps a little exaggerated. Sensation seems perfect on both sides. Station is good. He stands on either foot. Stereognostic sense is perfect on both sides. No hemianopia. Both discs look small; edges are a little blurred; arteries and veins are prominent; no sign of neuritis. The cervical spine as felt from the spine is normal.

~~Laurence~~ 38 Laurence 50

I saw him with Dr. Henry Thomas 3 years ago.

70 years ago well & strong. F. & h.

no loud S<sub>2</sub> came of heart. no bundle but no murmur  
of. Rheumatic. Bicuspid bundle. & had some a  
depressed. no bundle, but 2 w. ago in a turn & local  
phys said valvular defect. Typhoid fever in 87.  
Typhoid fever in 1884. No syphilis. no gonorrhea.  
a b. in 5' and outside visible line. no much cervic.  
no thrill. at a. v. b. <sup>visible but</sup> ~~diastolic~~. soft at apex.  
along C S in. and dead. at aortic valve a  
over white murmur. very intense double murmur.  
diast. more intense. map at aortic cusp.  
2nd sound not heard. no cretinal ruffling. no  
apex moving but a distinct slight visible pulsation  
in 2nd right. arteries are soft not sclerotic.  
Remarkable case. no lymphatic. no shortness of  
breath. no pain.

In Sept. 1903 shock. a fine great exertion & effort.  
very bad & worried. ran half a mile up & down hill  
then a month under a another. only some feeling in  
heart a going out & spirit. when he got home.



add more. An enlargement of the heart. Some areas are blue  
and a little thickening of the lungs. An enlargement  
of the thyroid. Lungs seem clear at the apices.

acute adiposis.

14/4/84  
S. J. E. A.

~~32. 2/30 Date 50. 0/1 -~~

32. 2/30 Date 50. 0/1 -  
G.A. stout - cannot get about - in ~~last~~ year  
gained from 135 to 207. <sup>weighed 83 lb at 19.</sup> - has been short of breath &  
heart beats so & arm so weak. Has always been so  
Energetic. Can travel about. walked 10-20 miles. Walked  
a great deal. V. W. & S. Has red grippe. Perum. at 16. had  
attack of Rhen. fever. Suff in joints & arm. One arm  
will be helpless. & feet suddenly lame. Almost helpless.  
Arms & legs & stick  
Her naturally - 2nd appeal. Strong dige. Not more  
to eat than usual. came out 2.7. exp. here even  
since. Now eats very little - no abn. large - 1 - 8 - 1  
apple. Sizable. no change in urine. No  
2. 120 red corpuscles. in urine.

"I am just a mass of fat" - so she is. soft & plabby.

Like Byrnes only robust. Mother not stout - Father not stout  
very red cheeks & nose - dilated pupils. Small red woman.  
No cracking of the skin. joints gone

4 yrs ago went to 160. Saw only first ovaries & took his  
specimen.

There is no sclerosis of the arteries. The heart sounds are clear at the base; soft systolic. No throbbing in vessels of neck. No enlargement of the thyroid. No special throbbing in apex region. Sounds are clear, perhaps slightly murmurish over the body of the heart, particularly along the left sternal margin and in the pulmonary area. Definite throbbing in sternal notch. Abdomen--liver is not palpable. Spleen not palpable. The upper limit of the heart flatness is on 4th. Feet are not swollen.

X. 11. 04 . Weight now 186. - has . Glen-Springs.  
for 6 w. & then to Danville. Was able to walk 3 miles  
a day. . Better now.

She has lost 88 1/2 pounds. The heart no longer troubles her. The pulse is but very slightly raised 88. Quite regular and of good volume. She feels the strain. Definitely tender just opposite the third rib. Heart sounds are clear at the base; both are rather snapping and valvular, but perfectly regular. Flatness is still high. At Watkins Glen until July; Nauheim August 5.



Dr. med. K. a. n. j.

3 for. (1/4 in 1. in a.)

[illegible]

No. 127.  
1774 in  
family.

[illegible]

and sometimes + remember the little - & stay it as if it were  
that day in the name - but I do not. When I see you  
go out I think of their other names. Names, names, names, all  
the day... They drive her crazy. She will stand for  
nothing which is a mean name. Even she as well.  
To be called a poor person, a name will ruin her &  
ruin the life of her.

Y. & looking around - abso. negative in examination.

No med. - To live a good life - & keep away from.



The pulse is irregular; about every third beat, sometimes every second beat; often a small beat can be felt. The vessels are a little sclerotic. A cool fall of temperature is observed. When spread over the precordia, over the lower abdomen and the fold of the chest. A. b. in 5th, just in and outside the n. l. The shock of the imp. is quite forcible. Weight imp. in area of transverse c. f. No murmur at a.; just a slight bruit when he holds his breath. There is a faint gallop sound. The heart is in the intercostal space, the heart is in the intercostal space; the heart is in the intercostal space. It sounds as if the heart had been into gallop sound; singularly uniform, it can be seen and felt as well as heard. The fourth beat is short, and two distinct impulses are seen, just like the flutter in a gallop sound. At the a. c. no murmur. It is remarkable that the heart is in the intercostal space of the thoracic impulse. In r. p. no murmur; marked venous imp. on neck. The pulsation in the jugulars is very uniform. The interruptions in the aortic pulse are not seen, perfectly regular, about 34 in 24 seconds. There is a faint gallop sound. The heart is in the intercostal space.

*Neurasthenia* ?

I. 5. 0 6

Dr Callett

It lasted 10 days. Came on violent cold  
and cough. Did not lose power entirely, no fall  
in temperature. It was a severe case.  
was in April, 1903. 2nd, in Feb. 1904.





Aortic insufficiency.

Waller's syndrome

III 2.05

~~21702 Pratt~~ <sup>48</sup> 21702 Pratt

Stomach & heart. has belching even of water.  
heart catches, lapsed. In Saramac Lette. are attacks  
jumping & severe. - no fainting. Has had ind. fingers  
not shd. present. Lost 21 lbs in a year. - cannot sleep  
asleep when walking. even arms & legs feel numb  
and cold as if dead. Poor circulation.  
one finger felt white & cold.

Current case - no collapsing pulse. murmur scanty.  
audible at a.c..

To me Glych.

She looks a little thin; tongue is clean; pupils react well. No soreness in the abdomen itself. Marked throbbing of the abdominal aorta. She has a very relaxed abdomen. Right ren is freely movable. Apex beat is in 5th; marked systolic shock; slight thrill which feels systolic. Both sounds are loud and clear at the mitral area. As the sternum is reached a definite diastolic murmur; heard best along the left sternal border, loudest opposite the fourth, only just audible at the aortic cartilage. Clear over the manubrium. Slight throbbing in vessels of neck. Pulse is not collapsing in quality. Both sounds are very loud and ringing over the whole cardiac area.

Renal Calculus.  
Case.

111 3.05

Dr. Garrod.  
or Stanley.

~~Washington D.C.~~ . 50. Washington D.C.

Indig. since. 15th of Nov. . In. Hrb. - for  
typhl fever & weeks not better. Never indig before  
also another ailment - lump in left side. Life has changed  
27. - very active - uncom. & snail. since then in office  
not the usual good appetite. till typhoid. certain food  
deduct. appet. Gen. appee of feeling a pain in left side & across  
this bowel. Contin. ache. Food makes it worse. & has  
often eating & sleep in the day time <sup>at night</sup> never in day time  
but at night. before 10 & 12. & now indig. at 20 min. b.  
for about 2 weeks it did better again in the day. No  
irritation - no belching. Lost in weight from 212. to 163  
Colors good. no more eating as much food. No discom.  
no yellow. Liver int. clear & soft. Const. of past 6 mos.  
P. H. In 70. ty. day. in '80 m. m. m. in Dublin. In  
'92 chills & fever. Florida. & in '89 & '90 not since. 92-96  
Renal calculus. passed gravel & ache in back & sharp  
aching pain in the side - none since 1856.  
no pus - white stool.

A very healthy looking man; very good color. Tongue is a little  
furred. The abdomen is flat, natural looking, a little wasted, no

sign of any bulging, no peristalsis, no shadows. The left line is fuller than the right and a little fulness in the left flank. Occupying the left side, filling it to the back, easily palpable with the two hands, is an enlarged kidney. It descends with respiration. It is irregular on the surface, not painful, extends anteriorly as far as the middle line, very freely movable, very firm. The flatness is as high in the flank as the 8th rib. The colon can be felt in front of the kidney. The heart sounds are clear. In the sitting posture no special difference between the two sides behind, perhaps a little more fulness on the left. No encroachment upwards on the pleura. No friction at the left base.

Graves Disease - form prout.

(Indianapolis)

VI. 605  
Dr. Page. &  
Dr. White

18 Dec 1904 grippe - cold a sine trouble with nose  
blocked - Dr Page said - Thyroid gland swelled. never  
before - seemed to come in about 20". Thyroid  
lobes 100. took 4 a day. lost 18 lbs in weight, no  
effect in the gland - got nervous. after the tablet, had  
been wandering for sev. years - but not recently nervous.  
no family. Fanning light thing. M. d. 65. One sister  
has swelling of the thyroid.  
No heat in nose - in the des. - skin is very well. Crisis  
easy. Has been at Cornell - Hall for 2 mos. May 5th -  
started - & has been better.

Is stalky - hemion dependent. is flattened.  
p. 100. regular - good volume. 90 from in  
gas. lack of convergence marked. 2nd lobe  
of thyroxine involved - and not very slight, on  
the side. but up the inner. Marked beating  
+ throbbing. went over the gland - no incision.  
Eventually would form of the gland as

March 27th. 1907.

1. Rest. as much as you can. - not see too many people.

2. See boy in week.

3. Explain for ill. T. & S.

4. April & May.

Good appetite.

looks well, colour good; a little tremulous, face & neck still flushed. The veins on the back of the hand not pulsating. The radials are full. The neck is a little enlarged on the right side, only the right lobe affected no increase in size. The heart sounds are clear, action is visible, no murmur. Soft murmur over the right lobe & over the upper sternum. When she sits up murmur is heard at the apex, not transmitted to the back; not the slightest prominence of the lungs no Stillwagon's sign, measurement of the neck over the greatest prominence, drawn tightly

June 28th 07. In last 7 weeks most of time used in walking, see boy. continuing. "Did little the system for 2 months no troubling at heart, improved less, the better, cannot claim without feeling the throbbing. Lungs much better - has gained in weight. h. still about 120 now in sitting posture.

June 28th. 1907.

The tremor is much less. There is not the slightest protusion of the eyes. There is still a little swelling of the right lobe. The heart's action is forcible; shock of the first sound is very marked, soft bruit with it which becomes more intense towards the base, heard over the sternum, but not heard over the gland; very distinct capillary pulse. The superficial veins are not engorged; no pulsation.

# Duodenal Ulcer.

July 4<sup>th</sup> 1885

~~46~~ 46 madison wis.

Melania. 1st attack in Nov. 2nd 7 w ago.  
never anything like it before.

P.h. In 1884 had fresh attack 3 w after had phlebotomy in left  
leg, 6 w after in rt. leg. On bed 11 w. up 1 w. & then had  
right phlebotomy in bed 9 w. & nine mos. away altogether. 9 w quite  
well. Ac-Rh. 24 ago had attack 4 w. turned in sheets.  
M. 2 mos. worked hard. Before 1st attack, some  
acidty. & crumbly. and at a visit, a little pain in stomach  
& a sickly & faint. & had to be down for an hour. made 3 attempts  
to get home. Next am. saw the blood in stool. Lary & liquid  
& 4 or 5 of them. Stopped in 3rd day. Pulled up 4 weeks  
Kept at work all the time. Felt well - did much work  
the winter. dry good no pain, bowels regular. Then in April  
began to have pain. Took soda - 2-3 hrs after eating  
& often heavy seas in stomach. & some nausea. in April, no  
vomiting. Passed much blood in last attack. much blood  
did not faint, sweated & got very pale. Lost 20 lbs in 7 weeks.  
3 weeks in milk diet, up every day. - was light headed.  
3 w ago began eating a little meat. Some discomfort every  
day. Milk all night. 29th. Better milk.

Continued. So pale. looks sallow.

Abd. flat - not dist. no peristalsis. a little tenderness in forenoon  
over pylorus. & right. no tumour. in deep press. no dist. of  
stomach. glands not enlarged. Evidently a duodenal ulcer.  
no signs of gastric dist. Has been in hospital since last of last year

more fair.

(1) To line out - of door. (2) To table milk - diet. & soda.

(3) Bessemer. (4)

neurasthenia, males.

Dr. McKenzie

Sept 19. 05

~~42~~  
F. Ridgeway St. Douglas 2 m.

Three for 20 m. past. tired & faint at 2 sides of feet for  
no after 4 h. is standing. Pass water 8-10 a day & 4-8  
at night. Exam. 50 times in 2 y. Phosph. Sp. Sp. night. pale at times, the  
whole. Pers. abt. 5 w. ago. all night. Saw no pain. Memory bad, very  
bad. A custom, will come in & will not recy. him. Not often in letters  
Heart gets sensitive & feel it. get tired. Any young matter head ache, any  
wornis appear. Knee, feel it. Read any thing & feeling. Cramp in hand  
at times. A twitching in arms. Waking - pains in not. Sleeps well -  
troubles often. Thought seen things more 2 8. 9. ago.  
headache. Stomach dilated 3. 9. ago. (Evidently a d. - cramp). Pain in groin  
cont. for 2. 9. last now. headache. Lenses at times every hour at times. Cold  
feelings in head. Saw half an hour under. of phosphates. When water  
got very bad & visible of the bladder. Not a night for 2. 9. in which he had  
not get up to pass water. No pus - no blood. About 8 mos ago the illness  
began. Dig. fairly good. Bowels regular. Not able to keep at work. Works  
in the country. Worries without cause. Excit. not agree.  
No syphilis. 7. 11. m. d. of h. d. 7. d. of R. b. & h. d. B<sub>2</sub> w. S<sub>3</sub> w. S<sub>5</sub>. Nerv. fairly.  
Not a driller. feels cold very much. H. St. now 10, 2. Has been at 9.

Exam neg. nothing in prostate

Dec 2nd 1905. Returned body. went to Levat. near 3. 4. whole here came  
& Hotel. saw & lie down. heart beat & painful. pains. feet hot & pained  
surrender off. 9 St. above near dog. better - weather beautiful, but at  
same place. improved on each side the time. appet. better. algaes. in those  
walked & some pains & flushed. At night ashore & drive. 4 h. water  
very depressed, as yet better. Injuncta better - const. walked 1 1/2 hr. same thing  
He had pains in head & came outland from Amsterdam. 9 St. better. See  
me in, we very same. Curious, no depression. The brain

1 To sleep at business

2 No exercise

3 1 ul. ind.

4- no ind.

Dec. 7th 1910

Looks well, good colour, pulse regular - good tension

Apex beat in 5th, no increase in area of cardiac dullness.

Sounds are clear. Abdomen, Stomach, lower border of umbilicus, at navel. Pylorus not palpable. Liver not enlarged.

Spleen not readily felt. Pulse active. Knee jerk normal.

Nov 7/1901.

(Dr H. H. H.)  
Leam.~~Nov 7/1901~~ 42. Leamington

now attacks. - Bang in July steady for 3 mrs. - For rev.  
 4. appeared. 5 y ago. not open. slg. feel of apr in mid of  
 abd. then pain when better, but fearfully ill. last a week.  
 no vomiting. Cms exposed. no swelling of abd. Pain in center  
 pub. Had gained years ago never with. these attacks.  
 Ever seen at intervals. except last year for 9 mrs. perfectly  
 well. Jan. to Sept. nothing wrong in. is all well. - then  
 turn of fatigue. sud d. the 10th is 2 dgs - keep about no  
 pain - then the pain begins, get severe. no morphine. no  
 vomiting. Had 5 y ago haematuria with pain, quite diff these  
 had an attack recently. - last Sunday week an attack. 2 or  
 3 dgs - not bad, no food, longer appalling white washed.  
 nothing good. nothing makes any diff. not cessing.  
 more than last 3 mrs. affect. heard, a 'black depression'  
 cramps now. then get them - little ill. - then 3 child. -  
 2 both well. at Nat. looking. no peristalsis. H. lies down  
 easily back below cost. margin, & can be moved into the r c f  
 & to the middle line. in erect posture high can't felt. very move  
 tender in bounding. & can be pushed far over.

1. Bound & hard.
2. Careful with diet

1. Attacks continue - as bad as ever, not so violent -

feeling hot. Constip. a day or two. no blood  
seen. No urine since end of Jan. No vom. in attack.

Sickness & pain in abd. very inside. back in back, possibly  
from stone in other kidney. In the S.G. only 9 hrs with perfect freedom

S.G. age apparently very bad

. now. Kid. well up. nothing felt at joint & in back  
which does not come down but if increased & am  
the kidney comes out plainly but cannot get in as  
was in previous exam. evidently better.

Ch. lymph. abd. leg.  
Elephantiasis

Dr. Brooks.  
March 17, '06

~~At 11:00 am 6-17-06~~ 11

5-9-ago paral. <sup>of left leg.</sup> infam. - got over that. 1" numb. - did not last long. G. man & done well. & legs go - proportionately.

no illness.

... began 2 & 3 <sup>ago</sup> yrs. ago. with a large <sup>ms. & hardened</sup> leg at joint. - ever since has been swollen but goes down in water but for knee & ankle swollen - not through, no pain. no redness.

Thigh. leg.  $1\frac{1}{4}$  smaller. & calf  $2\frac{1}{4}$  below 5" above in m.c. Just up  $10\frac{1}{4}$  <sup>cm</sup> again &  $\frac{1}{2}$  st. Nothing in abd. Spleen just palpable. Glands ingrown palpable. Skin clean over leg. Foot & leg unimpaired enlarged. Toes little bigger. Only pain with too deep pressure.

Toes enlarged



new show "How a Nutty". I and ~~and~~ some young & silver, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, 100, 101, 102, 103, 104, 105, 106, 107, 108, 109, 110, 111, 112, 113, 114, 115, 116, 117, 118, 119, 120, 121, 122, 123, 124, 125, 126, 127, 128, 129, 130, 131, 132, 133, 134, 135, 136, 137, 138, 139, 140, 141, 142, 143, 144, 145, 146, 147, 148, 149, 150, 151, 152, 153, 154, 155, 156, 157, 158, 159, 160, 161, 162, 163, 164, 165, 166, 167, 168, 169, 170, 171, 172, 173, 174, 175, 176, 177, 178, 179, 180, 181, 182, 183, 184, 185, 186, 187, 188, 189, 190, 191, 192, 193, 194, 195, 196, 197, 198, 199, 200, 201, 202, 203, 204, 205, 206, 207, 208, 209, 210, 211, 212, 213, 214, 215, 216, 217, 218, 219, 220, 221, 222, 223, 224, 225, 226, 227, 228, 229, 230, 231, 232, 233, 234, 235, 236, 237, 238, 239, 240, 241, 242, 243, 244, 245, 246, 247, 248, 249, 250, 251, 252, 253, 254, 255, 256, 257, 258, 259, 260, 261, 262, 263, 264, 265, 266, 267, 268, 269, 270, 271, 272, 273, 274, 275, 276, 277, 278, 279, 280, 281, 282, 283, 284, 285, 286, 287, 288, 289, 290, 291, 292, 293, 294, 295, 296, 297, 298, 299, 300, 301, 302, 303, 304, 305, 306, 307, 308, 309, 310, 311, 312, 313, 314, 315, 316, 317, 318, 319, 320, 321, 322, 323, 324, 325, 326, 327, 328, 329, 330, 331, 332, 333, 334, 335, 336, 337, 338, 339, 340, 341, 342, 343, 344, 345, 346, 347, 348, 349, 350, 351, 352, 353, 354, 355, 356, 357, 358, 359, 360, 361, 362, 363, 364, 365, 366, 367, 368, 369, 370, 371, 372, 373, 374, 375, 376, 377, 378, 379, 380, 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000.

Pain in bladder & abd. stops in asc. weight is 20 lbs heavy. then  
even. ap. good. made salt cat. some more.

F.H. 7 m. w. M not ven. F. not ven. - died of Pneum. sc. sclerosis.  
as young girl. untill hand 20-20 - no breath down till expired, haggard &  
emaciated. a practice 5 years with no result. in 20 years no cure.  
"Dr. Sewell says of west to work now would fit well"

one 13.4. after 6 weeks. not of bladder even a recent menstr. period  
as above & never. in 14. ap & down, headache, 2 days later, eye strain  
gt. Pains & reading, yellow & cold, same again. brought 135. to 140. weight  
1 1/2 hr. but all the while. Good dig. bowels all right but 4 night, could a  
bleeding of the skin. & pain in neck at 2. no more. "Plumbers"  
Eastgate Hotel. (went 14.4. 1891. 50. - after)

7, NORHAM GARDENS,  
OXFORD.  
April 19th. 1906.

Dear Dr. Taylor:

I saw your patient, , on the 16th. I asked to have a radiograph taken, and I enclose you Dr. Bruce's letter. I have not yet seen the prints. I am leaving for Germany to-morrow and will be away for ten days. So far as I could make out, I do not think it is a case of disease of the bones, nor has she had the pain that is common in the pressure from tumour. It does not seem easy to say upon what the spastic paraplegia depends. If the prints show, as Dr. Bruce suggests, signs of very definite lesion in the caudal equina, the question of operation will have to be considered. I shall be away for ten days. At the end of that time I should like very much to hear from you. I suppose in a case of this long standing she has probably had iodide of potassium. If not, I would suggest that it should be tried meanwhile in doses of twenty grains three times a day. Please see  and let him know my opinion. I have not time to write to him before leav

ing. Please return Dr. Bruce's letter.

Sincerely yours,

History

# Visceral Lesions of Enteric fever

May 11th,  
1908

Dr. M. H. H. Bath.  
Dr. Emily Thomson

4 Tins 5/6  
Dried.

~~10~~ 10. Balmyle Broughty Ferry, Forfar

W. as baby. W. 18 1/2 lbs. - not well as baby - mother died. - and good  
reg. ill & wet nurse - nurse all recovered. Since then revealed attacks  
of liver & stomach - always preceded by pain & fever. Last attack at 17.  
Then long 2 mos. not longer than 6 w. Fever 1 d. cannot get down in  
stomach. & show as that the best would. shabby. not much vomiting.

(3) Diarrhoea. Fever 3 - days. pain 4 - 5 - days. abd. swelled. ~~was~~  
would swell very much. Spleen were found enlarged. 4 - 5 - days  
nausea & large black vomit. & one of the worst. had at 5. Came suddenly  
on. Food. Worms never said to be affected. After that: no swelling  
of joints. Fever & least rest. her legs banded up. with their  
digestion. of sp. Dr. said children poor. 1/2 egg & a cup & 1/2 buckles & abdomen  
always. with the attacks. I would have put me as other did not.  
Dient spots. & urticaria. Now we last attack. no erythema... little  
underlying heat. in them. 1. After 95. 8. 100. 95. 2. & 95. 0. in case.

Other feb. hot. In 1907. only two in the year. slight attack in summer  
out. no suff. Strangely, one & better. tomt. Eating the mother  
thru. effects. Pinner. ~~2~~ 2 children died as infants; 2  
girls living. 1 & 2; perfectly healthy.  
Very 1/2 head case. - attacks evidently of great severity -

He is a healthy looking boy; good colour; he  
weighs 4 1/2 stones; tongue is clear; teeth are  
good; skin of the face clear; his chest is well  
formed, good expansion; abdomen  
natural looking, no distension, everywhere

soft; no tenderness; descending colon readily felt; spleen not palpable; pylorus not palpable; no distension anywhere of the colon; liver is not enlarged; right kidney just palpable; upper limit of liver flatness is on the 5th; apex beat 5th, normal situation; Superficial cardiac flatness on 4th, left sternal border and just inside the nipple line; heart sounds are clear; second pulmonary snapping; joints nowhere enlarged, nowhere tender; no fibroid nodules; the skin is everywhere clear, nowhere any trace of old spots; back is clear; knee jerks are normal







Ins. care.

Aug. 14<sup>th</sup> 1906.

Mitral vs. curvature.

Dr. Harvey Whitney.

~~Ins. care. 34 Box containing 1000 Chem & Duffett.~~

M. 6.3. 1 ch. 7.5. 70. Br. M. S. alb. at 55.

<sup>7.4. as 80 or 85 lb. weight.</sup>  
Inf. Kidney trouble at 5 does not remember. no ep. plow. no  
pts. no R. fever. no H. V. dam. no tenesitis.

Habit - insular. no ep. pts. Dr. H. beer. Smell 2 of a week.  
dried. 10 mus. 33. spe in whitening. no mean whole in half.  
no sh. to flr. muscular. purple & cycling and over. not rare  
cycles A. in 6. no st. of meat.

Height 5.6. 2.6. four mus. Chest. good. 2th good. p. 100 welling  
fell - 82 in record. Precip. is a little full. a. b. not visible  
both in deep 4 ft in 5th part inside upper line. V. not at all before  
c-fl. abs. just at 2 cm at side inside line. H. st. border and with many  
4th. Shape of 1st peak. Aus. low<sup>est</sup> near apex. heart + not  
at all. follow of st. 2 no more. M. more in culture to the apex.

Max at 46 cc. 4th sh. margin. well heard in the 3rd & 4th left  
cubic. Down into towards the anterior cart. & not heard in vessel  
near the w. heart. 2nd sound well heard in 1st cubic  
pos. more more intense. - after 46 cc. 1st sound is brought out  
at apex - more intense & more loudly heard in at illa. Probing  
to the pul. not to the cart. no pres. more.

Rath. curious case. which I should say - not a good note. tho.  
the curve is well maintained. 2nd class note

copy in book of specimen

no trouble

The general appearance and condition excellent. His pulse is 100 in the erect posture, 92 recumbent. There is no sclerosis of the superficial arteries.

The chest is well formed, the precordia slightly prominent; apex not visible; moderate pulsation at ensiform and lower sternum.

On palpation apex beat palpable just below the outside nipple in the fifth interspace; no thrill; shock of second sound palpable.

Superficial cardiac fistness upper border of fourth rib, right sternal margin and 2 cm. (about an inch) outside the nipple.

Auscultation: a loud systolic murmur at apex seems to be mitral, obliterating first sound, second sound loud and snapping towards the sternum. The murmur increases greatly in intensity and the maximum is over the body of the heart and the fourth interspace. It is very loud all along the left sternal margin. It is not heard at the first right interspace and not propagated into the vessels of the neck. The aortic second sound is loud and clear.

The mitral lesion is perfectly compensated. It has probably resulted from some infection in childhood, or from the severe influenza seven years ago. He has no shortness of breath, and the heart's action does not become excessively rapid after ordinary exercise. Barring the accidents to which such cases are liable--e.g., fresh endocarditis in a slight rheumatic attack or any infection--it is the condition of heart that may remain much the same for fifteen or twenty years.

Roston neurasthenia

Aug 30th 06

Dr Tolson.

25th

My ~~dear~~ Boston Mass

Wrote from Gray Hermitage. Prof. Koster. Aug. 30th 06  
at 40 years past very late. 5-6 y. ago. Koster said pain & swelling  
the tendon. Some time after on various remedies. He does not know  
with. but tendon to stump of st. ovary. Prof. used by adhesion when  
taken out - never. freed. remained at last still per. 2 y. ago, pain in  
tendon & st. leg. which is swollen & in white skin. K. found nothing.  
st. were swelling & pain in st. leg. found nothing. & leg not swollen in  
much as 2 years ago. Taken out every day, & pain after is relieved  
as rule. But pain of leg & stuff in tendon. 2 y. ago on road & over. Now thing  
is got over of nature. more or less. today. but mind more than sharing  
4 years now. 6, 7, or 2 mos. 2, 3, 4 y. ago. Very bad. loss in strength &  
in weight. 137 1/2 2 mos ago. At Ragatz. better. Pushed balls for 1/2  
thrup. however for later. only once. mounted. when seals each year 6-  
no. 2 or 3 times with the cannon. He can better bread & eat. Workers  
with st. never return of movement & pain. Even if you make control  
& no pain & narrow. Ill for 15 y. ago. Ernst.

Mother & Father records.

2. Ammalum negative. tendon clean. arm very light. no more no  
tendon except with a good & a sort of rope but the muscle is smooth  
and there is no induration. Pain very capacious.

Neurotic breathing  
& Palpitation common case.

Sept. 15<sup>th</sup> '06

Miss ~~7. H. 27<sup>th</sup>~~ Chester Norham. R5

18 4 25. 1st symptoms came on while out walking panting & felt  
faddy. Tight & like worst. & has to pant & eat. Some then not again till 1<sup>st</sup>  
anxime & 11/2 hr after '97. While in hospital 3 yr. not at all. In 2 or 3 years  
off & on. Later more each time more ill. Sudden onset & sudden go  
lasting 2-4 days. Last year end of April came on & has not left - 14 days  
before a doctor. & then faddy & in bed had pins & needles in fingers. & end  
of tingling all over body. In this case when bad while sitting still - only  
difference never broken from sleep - not other than in bed. Anything which will  
affect use of fingers, swelled them with cotton. Less with scotch than  
gr. of goes up stairs with ease. Has not been able to walk for a week. &  
now in bath chair - has bed 6 w. last year - May & June. Better. & the  
heart got quieter. & sit up in bath chair. Then better "kicked up a bit"  
came on again with panting. - not a short. & 11. Breathing as now.  
last her.

7. H. w & sit - as girl till went to Paris & at school. 35, alarmed; anxime.  
a run. All anxime. used in. Home - kicked up 20 th. f. Had m &  
ch. por. ut. cough. - v. h. coughed, coughing. at night & day. (worked her)  
Still coughing. - no coughing. 7. H. 7. Nov. a high shing. m. not.

P.C. looks well, good colour. not neurotic - looking. p. pulse about 104.  
no tremor, not 4 ft. no gallop. H. ad. rapid & can be felt. Short of it had, no thrill.  
no murmur at base aortic aortic. - no prolapse. after 40th very rapid. & she begins to  
pant - rather deep & very breathy heart, action very rapid.

1. Live just up. now bed - not over so 9 May & June
2. The vor. sleep & age ch more when she is in
3. Breathing becomes night & am.

July 27<sup>th</sup> - Unrested in Rome - good, better in Rome. Some attack  
came off a few by degrees decreased & in last 3 mrs nearly  
any - 2 1/2 bottles of med. less in severity - but one not  
much June 20. Throat brings it on. as regular as clock work

before storm - not far from all - was short of food, when got into  
no real sleep - no all night with the horse sat down, or have her legs up  
able to do everything. Not upset. Walked a great deal. - but not as she used  
to get tired. Will bring it on. Fanned - not disturbed at night.  
The throat is somewhat swollen and sore and sore. She is  
she breathes this both nostrils - almost constantly with a little  
The lower jaw is set and her mouth is always open. (but she  
mouth is not dry)



June 14, '07

257

23. Eugene, Or. usa. Rhodes Shale (liv.)

[illegible][illegible]

2. Area negative. no marked trans. under, south of bridge & stream on all night.

1. 10 and more  
2. 10 under eyes  
3. 10 under 3 - 0 and half  
4. 5

Verljo

June 18th. 07

W. M. M. S. Smith

~~Verljo~~ at.

cert. des d heart dull. dragging, no pain but 7 or 8  
w. ago. 2nd sharp pain in chest, could not bear to lean forward  
the left side. at night sleep 1 got out the bed. - any thing in left side  
sharp pain came. "in the chest" called 3 weeks or so. I had diff.  
of heart in right side. 2 years ago. nervousness. not as severe as last  
not just at all. nothing. 2 years ago. 2 years ago. 2 years ago. 2 years ago.  
walking & sitting a seat - serious - 11 weeks. a head young man. &  
EAT. diff. with diff. but the when got the art. a floating feeling  
chairs. Other day preaching. going down stairs. at the bottom gave  
a great cough - caught at the staircase. 2 years ago. 2 years ago. 2 years ago.  
last 4 years. 4 years ago. 4 years ago. 4 years ago. 4 years ago. 4 years ago.  
shakes - 1 year. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago.  
the worst. 2 years ago. 2 years ago. 2 years ago. 2 years ago. 2 years ago. 2 years ago.  
an up - 2 years ago. 2 years ago. 2 years ago. 2 years ago. 2 years ago. 2 years ago.  
now again 5 years ago. felt better. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago.  
no smoking. but 1 got out of it. last night at home. 5 years ago. 5 years ago.  
President. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago.  
a. slept badly. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago.  
but. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago. 5 years ago.  
20 years had 6 times in each year was close to the end  
pain at that point. 20 years ago. 20 years ago. 20 years ago. 20 years ago. 20 years ago. 20 years ago.  
active life. 20 years ago. 20 years ago. 20 years ago. 20 years ago. 20 years ago. 20 years ago.  
+ 10 years ago. 10 years ago. 10 years ago. 10 years ago. 10 years ago. 10 years ago.  
eyes crossed. 10 years ago. 10 years ago. 10 years ago. 10 years ago. 10 years ago. 10 years ago.  
not good digest. 10 years ago. 10 years ago. 10 years ago. 10 years ago. 10 years ago. 10 years ago.  
weight & sleep 2 years ago. 2 years ago. 2 years ago. 2 years ago. 2 years ago. 2 years ago.

very healthy looking man; cool calm; slight smile; no teeth;  
tongue clean; pulse is regular, 90 to 100 beats per minute, easily  
compressible; radial palpable; brachial largest—well felt, but  
not palpable; apical pulse 1/2 visible; slight diffuse tremor;  
no fibrillation in ventricle of heart; cardiac rhythm is not normal  
border, lower border of heart not well defined in the right.  
The heart is not enlarged; no enlargement of ventricle  
seen. Aortic valve, mitral valve, tricuspid valve, and pulmonary valve  
not enlarged; edge readily palpable; spleen not palpable; on  
exertion soft systolic at the base over aortic area, and  
he gets quiet; definite cardiac-respiratory bruit with inspiration



neuritic heart:  
mutant.

Dr Gray.

Jul 29/16.  
'03

My, all the time, with regularity, broke down. On 2, brain  
fag. Took much exercise - all life. 8.9. after. broke down mental  
in '91, allowed to drift into it. Signs of heart - for some time. Felt  
well. but pulse weak. began to run again. had run 1 m. a day.  
Had an eve run every night. What happened. I had been running  
felt heart thumping, legs cold as driving, ran across park as  
did felt pulse like series of volleys of cannon. Next am p. still  
going rapid. On a day of 10 in bed. 2 days. Mus. weakness.  
Then Williams said Mutual regulation. at end of 1.5. again  
at end of 3.4. recovered. more. still all the life till 1900. During  
the run. & cycling. up passes. When came on it as Gray with  
pulse. & sphygm. & 14 days <sup>after</sup> broke down at read of stairs. heart  
went all to pieces. In mind of Prof. Ter-cent. Carr. I saw  
Williams. who told me that had dilatation. 5 w. in bed  
at top. strain felt pulsant & perhaps panted. Went to Southern  
School. 1902. Then in 1903 Williams said better. still slight  
residual dilatation. & since then no return. I bit. I had enough  
del. sheer nervousness. but in a good nervous abt. any  
mus. & action. In Holland. up hill. awoke with palpitations which  
is unusual. no dilat. but temp strain. made him nervous. even  
little things - a letter - nervous resistance - "I am too nervous  
to answer this of a gentleman pen". A - O. shifted. & after he  
has told. can do anything in ordinary way not panic terror any  
of nervousness... perpetual conflict & 20 years.

radial sclerotic.

in 5:00 when reg. marked it; diffuse - wavy. rather  
faint. rate 128 - + 140. Cardiac. reg. reg. des. & sensible.  
no beat. open venting in apex. Still reg. robust. less forcible at  
apex. no pulsation at base. no beat. a roughish quality.  
+ 1st. & a snap 1st suggests mitral disease. but there's no  
whuff. at apex in base - a no definite protrusion int.  
murmur. aortic accentuated but not - mm. *Palmar*  
A. N. A. brach. 4th int. & 5th int. pul. of nipple + +.

End of.

Dilated stomach.  
neurisy.

- Aug. 3<sup>rd</sup> '05.

~~9~~ 30 ~~10~~ w 80 ft N.Y. aff -

N.Y. 6.5. 15-5 lbs. slender lean & fresh. Very active. For 4  
years. working 20 at work & Sundays. R.R. Penn R.R. as burden  
heavy work. Result good using w. & working down. no rest  
no ear trouble until 2 y. ago had ear-trouble. Dr. Jacobs & June  
weg. 2nd head strain & ear trouble. Very dull pain in H of neck  
all over. Last 4 yrs more lost w. nerve & some down. Lost 130  
- 25 in 6 or 7. 2 or 3 yrs ago lost 7 lbs. Dr. Sweetser. lost last  
neck. And. prostration: sales found blood in it & treated with  
Brs. Suffer. & And. wound. Dr. S. went to Eur. came away  
11 yrs ago in dund. always shot up blood. never in usual clings  
in clearing teeth. under is hard stonier. 7 teeth broken with  
nails. 1/2 lb. later of ideas throat. no vomiting of blood. but of  
very mass in waiting. not much. (Dr. Warren said put that  
st. tube in throat st. of man & when). Laid on 10 lbs. not doing  
much. Married 3 yrs ago. Sleeping well. 2 or 3 hrs. walking.  
Out. gen. out in egg & but not much coffee. no des. but little  
D.

The colour is pretty good; mucous membranes red;  
tongue is clean; teeth are good; a little tremor  
of the hands; pulse regular; abdomen flat,  
natural looking; lower limit of the stomach  
just at the navel; marked clapnetment.

vertical area of stomach tympany under 10 inches.  
The edge of the spleen is just palpable; liver not  
enlarged; no pain over the stomach; pylorus  
just palpable; no visible peristalsis.

Heart = apex beat in 5th. inside nipple,  
no thrill, no forcible impulse; no enlargement  
of the heart; lungs are clear in front; good,  
clear breath sounds everywhere; percussions  
clear behind; nothing on auscultation;  
pupils react; Knee jerks are normal; Skin  
reaction very active

Tic

Dr. Q. P. Willard  
(born well 7.4)  
Sept. 15. 16.  
1907

~~Handwritten scribble~~ Tiffin Ohio

4. 7. ago pain in face - a long intervals - in N.Y. had a study  
of side - 2 left handed. - under a great deal. - Pain not bad all  
2. 7. ago then more & more severe. at first - not bad but the pain  
very bad. & that had carbon & cum. - Pain in ear of nose flamed  
at the chest bone - neither eat nor smile nor laugh any for a  
or many. of theophis - regular in Canada. Dr. Kelly, Dr. B. Allen.  
& Cole with away. Dr. Cushing saw her. pain so severe could not  
talk about it. 20. 1. 1. - Pain very bad ~~more~~ splendid. faint  
operations. days. Dr. Hoffman comes - a last comes & called when  
he had trained nurse. but came back & same again - Quebec  
& the trip - of little strength Dr. Ode. 24 hours not went in of  
by magic - In last week gone and made. how always 6 weeks.  
underlying not expected. but in London. see - Press in my mouth  
Lungs. not but a cold began & effects of. none in last 6 weeks. not  
free a day for May 1st till August. except the first days Dr  
Hoffman visited. does not want.

1. Last wife
2. mother
3. then of men

Post-paralytic paressthesia

Sept. 23-07

Liverpool. J. B. Thompson

~~London. J. B. Thompson~~

Springfield Ohio. (C. W. Constantine)<sup>sen.</sup>

Paris. Thos. Correll & Co.

One limb. reg. was left 3.2 yrs. Kestige. her short from it. No loss of cons. for a month perhaps. It side an immeasurably only sensory her. tho. a little band. of throat. vomiting spell caused it. 1 leg is up in the side - did not know it until put hand in hot water & found it was - Cent for while - & then became sens. to cold. & is so now. discom. not inter. Awful cur. 2 years not able to do much. Still discom. I was flunked for good last in chest. Headache - none. arm & h. only good. a little sensitive. bring in the arm & then old all time - actually cold. no diff. in feet. Fully well - except turning in head - when discom. all. Malena when young. 2nd headache. Pain as. cannot walk much. Massage does not help. 2nd year. rather irritated than helped. App. good. Temp. 98.6. no? much less.

A very healthy looking man; good colour; the only thing noticeable a slight droop in the left eyelid, which he says is worse at times; Sensation is perfect both sides of the face; muscular movements of the face perfect; tongue is clean & to put out straight; no difference in sensation of temperature of the two hands; feels where his fingers are; Sensation of hot and cold perfect; muscular movement perfect; small muscles of hands strong; only has trouble on L. L. & R. 2034

The paraesthetic feelings down the ~~arm~~ leg; pulse is regular, 80; vessels are not specially sclerosed; blood tension moderate; slight throbbing in vessels of neck; apex beat not visible; no enlargement of heart; soft bruit at the base, heart sounds are clear; liver is not enlarged; spleen not palpable; the right foot looks natural; reflexes are normal; Knee jerks are both active, not more on one side than on the other. There is no ankle clonus; stands well and on either foot; no swaying.

Bear Hunt Galleries!

216 Oct '07

7. T. Conny.

Verona

25- Peoria Del

[illegible]

dark red.  
The ... ..  
... .. all say yellow. - 2 ygs  
... ..  
clean skin. say yell. + cast. ... ..  
not the + anything, no ... .. 8h. ... ..

P.S. Note 2 salmon - partly grown. All eyes clear & silver grey.  
Turn. very bright. Skin full & gills dieting & bleed. No  
back trouble. Nothing at all in mouth. In open. No shadon

in fact in 1864. No change in 1865.

12. Rural Chic.

5 Fairbanks

Oct 17 11-  
1907

~~At Fairbanks~~, Wells.

9 children, 1st one 3 yr. ago. severe one. Came on in bed  
w/ great felt - wheeled round & round. & then called nurse. & then a  
physician called & got better. no other sensation room  
troubled. & then himself. at about 3 am. called 1/2 hr. Drove  
out (w/ wife) last. Aug. 2. 7. ago had an attack came  
suddenly. & led off. not accl. started & stopped but heavy. Has  
had 500. & had to hold on a bed down sometimes. Great  
unexplained since. For time & time feel as if everything went  
from mind - connection not for a moment, I had been under  
treatment for ear - both. came on suddenly in Aug. Aug. 7  
cloud in head & then deafness increased very deep. not  
went to nursing in case. Exam in town. not specially wrong.  
no more. treatment reduced the deafness. & only a bit improved  
Hearing returned last Friday. A pain in the side & at the  
tender 3.9 ago - no more. death well. & kept when cloud  
of depression. & after down again in bed. Pains in things & shoulder  
recently. almost uncut. but the, nerves, had been deeply.  
Amor & little. not bad at heart. no dyspepsia. - except at times

Neurostheca.

Dec 13 '07

Dr Turrell.

Not h.

~~Neurostheca~~ 45 Springfield, Newcombolt

H. g. to 20 wt. ring spine athlete with - large, jumping  
rapidly move. H. Stretched. 2 y. much of curing made & none  
had cur. lateral. part posterior. steel frame 2-3 years. made  
mollus and cur. for 7 years. 2 y. in India - came to H. Drif  
off the spine. could not sit. & always sat up erect. In Ind. India  
had members ac. or Fernie galvanism therapy. was esp.  
united. more than ever (1900). and not good. Surge 4 poles. Spent  
had got better. Had the Spine by Ross. & same time, did great  
deal of pain - pleuritis after it. Muscles. Formed at Operat-  
bones vascular & thickening, ligaments. In ant. 5 mos after  
leg got better. & then got pleurisy both lungs. (and left arm) had  
2 toffings. 1893-<sup>1901</sup> then pneumonia. gave up over & over again  
abt. in lung. empty time - mangled slowly. Veins cut in back  
leg. Picked up good, back again. When 1100. Exposed  
but poor, small to it & spinal trouble is not bad & can do  
exercises now. Losing strength from year to year. now (1907)  
weakness. E.g. in India. Had a great deal of work in India.  
Malaria. back 7 1/2 12 1/2 5 to 6. it was dry up. & had a terrible  
at sparingly. no more. eyes bad - gen condition;

He has a fairly good colour; looks better in the face than the body; very marked vaso-motor reaction; long scar over the upper dorsal region; the scar of an empyema operation below the right scapula; the spine is straight, the mobility is perfect.

Heart sounds are clear; lungs seem quite clear; a very high position of the stomach, below reaches just above the level of the navel.

Abn. Fever ?

Dr. Harrington  
Sept. 22<sup>nd</sup> 08  
Dr. Brown. 321 North St.  
(of Penang)

Mt. Lavinia

~~John D. [unclear] 53.~~ Hewley

In May had fever & then got periton. when suddenly all at 2 1/2 AM  
5-30 AM violent <sup>run at 100°</sup> had fever 3 days before in bed. 103° caught chill  
no pain. & then sub. pain - a bit of shiver - moping. Had  
afterd. 2 1/2 yrs. severe pain - was in same way. pain in side &  
lower. Attack in 20th lasted a week - & a lump was left to the  
right. no jaundice - no other attack of same sev. I am daily getting  
better - in 5 weeks. This summer getting better. Gained in weight  
Taking exercise & golf. until. On 29th of Aug, a 2nd attack of  
fever. Chill. - T. 103° in eve. 3 days after developed pain in  
the upper in the back no pain at first not acute like the other  
attack. no jaundice. no lump again. but a good deal of the back.  
but swelling at back. Fever last night only night. coming in  
from. Over 100° - no pain except when down back with a  
fair. Temp. passed.

30 years in the East. Starts. no illness. till 2 1/2 yrs ago. no other.  
no malaria. & no life. In Dec 1902 fever all at.

<sup>in 1902</sup>  
Chills <sup>started in 1902</sup> 2 1/2 years ago in Singapore - an acute - then plenty -  
fever. & some days on back. & a bit of fever 1 1/2 yrs. ago.  
Last year - fever was cured - at Singapore brought up a chest  
chronic phlegm - which follows the pleura & bronchitis.  
greenish yellow. & - not blood. not like any other

is in a healthy looking skin; feet edematous; not anorectic; tongue is still a little thickened; no signs of inflammation in joints; abdomen is normal looking; temporary constipation; no bulging in either side; right flank a little tender when palpated, possibly due to position; slight edema border of lower limb prominent, particularly in upper third; chest never full, does not hurt when, but in sitting up it would; no bulging of intercostal spaces; Paraspinal—inferred everywhere dull, not serious; edge of liver not palpable; lungs does not appear to be enlarged; liver can just be felt in parasternal line; no actual tenderness; the points of low liver are not sensitive to palpation; a little sensitive on deep pressure to mid-axillary line in 9th. intercostal; right kidney is not palpable. Pneumonia—liver always at a little high in level, indicating an abnormal position to level of the diaphragm and extending to the costal border. Heart—no special bulging; perhaps lower right intercostal a little tender when palpated; lower half of lower intercostal region in first and second spaces to the spine; this fluctuation extends round the heart and is about the level of the navel; tenderness is more marked over left half than; lungs within the flanks and around over the still area, but there is no fluctuation; very unusual sensation in the thorax; heart sounds are clear over the base; no enlargement of the lymph glands.



little rapid; radials are palpable; marked  
atrophic linea over the front of both shoulders  
& over the outer part of thighs in usual situation;  
above the groin there are 2 or 3 large ones;  
abdomen is full and large in the upper part,  
marked prominence below ensiform cartilage  
extends to the right; it descends with inspiration;  
very prominent in the upper half; on palpation the  
out line of the liver very definite, prominent; notch  
in hippie line; 2nd. one in parasternal line;  
edges very rounded; fingers readily pressed  
beneath it the whole extent; surface is a little  
irregular; one or two small prominences, but no  
very large projecting nodules; surface is very  
hard; in the left side the edge of the spleen is  
palpable; about 2 inches below costal border, rides  
over the fingers; superficial glands are not enlarged;  
superficial veins not visible; nothing to be felt  
below the edge of the liver; glands not enlarged  
above the left clavicle; heart sounds are clear  
apex and base; pupils equal, react to light;  
Knee jerks are present;

Aug 320'06

37 Bridgeport Pa

V. 900. S.H. Sept '07 ill. mid. pains in stomach very much. vom.  
 & diarrhoea. in bed 10 days. Vom. more & less. some vom. in T. at first slightly.  
 Saw Dr. T. & son. Their guest in children was. B. with Dr. V. S. I was that well with it  
 with a guinea shot. & 150 lb. Dec 23 called at Dr. T. practice case. at 10 & 1 am  
 had a chill & felt some pains in leg very severe in calves & arms & all the  
 body. ache - no fever. got up & on a couch sat about & greatly collapsed legs  
 same way - got pains & numbness in fingers & feet. in leg 1200 could not sleep.  
 and vom. in calves & feet after vom. at T. you came & order Dr. H. stayed then.  
 5 weeks. He & daughter vom. & Dr. (nephew) very severe could not sleep. then.  
 of legs & in waist in 40 cord. Left in March. after 4 weeks, action home.  
 travelled. went to bed at home. very nervous, tremor &. but on 10th all fine &  
 ended in 6th. in bed more than 10 - gentle exercise. severe pain in back  
 & ~~in~~ <sup>in</sup> ~~the~~ <sup>the</sup> ~~legs~~ <sup>legs</sup> & shoulders. 3 more weeks rest. of your infested spouse  
 infested left finger. rest rest of summer. Secondly agony. Thoroughly  
 bedded - in 10th. K? April. ~~was~~ but in 400 mind. Dr. Weaver. came in.  
 can hear. & said "a very large you have been along". April 10th.  
 72.5. <sup>marked enlarged</sup>  
 Papists enlarged. St. small enlarged both movable. rest made in sup.  
 very alone - numbness in a small way. no more of hands or legs  
 in order back - eyes found then at dark & little full & very large

Cervical rib - 21

17th June

'08

St Andrew

~~21~~

St Andrew's - home

Pain in shoulder - affects whole body. - Heart for  
2 yrs. Has had col. vein or artery. - for years. Suffered with  
milk leg. Has had 3 children. - youngest 5. no trouble. Varicose  
sh of breast but not recently. Said to have Rh given as  
girl (?) - V. h woman. Has 2 or 3 more sh of breast. for  
some years. 12 or 13 y. has had an enlargement vein or artery.  
her husband says - the arm gets numb & aches.  
2 mo ago she fainted. 2 or 3 mo after making an effort.

She is a healthy looking woman; high colour;  
no cyanosis; the pulse is regular about 82;  
pulsation on both sides of the neck; on the  
left somewhat forcible; it is just above  
the clavicle, extends from the outer end  
upwards and inwards towards the thyroid;  
it is much the same on the other side,  
only the pulsation not so forcible; no pulsation  
to be felt just above the sternal end  
of either clavicle, but it is just at the

outer margin of the Sterno-clavicular muscle; there is a little throbbing just above the sternal notch, forcible + palpable; Heart - impulse is a little forcible; there is no thrill; sounds are loud and clear at the apex; a slight rumble in diastole; not a very definite presystolic; the pulmonic second is very loud; no murmur over the tricuspid. in the erect posture throbbing vessel on the left side is well seen; it is a little swollen in comparison with the other side + there is a definite pulsation outside the mastoid muscle; it is a little tender there; the left arm is a little smaller than the right - turns a little + gets numb; on deep pressure it feels as if there were a much more prominent spine on that side than on the other; she feels perfectly where the arm is touched; the two middle fingers of the left hand get stiff; no definite presystolic murmur; both sounds are very loud at apex; there is no murmur at the base; there is a definite murmur over the enlarged vessel on the left side; no murmur over the subclavians, just over the clavicle itself.

~~Psychastheneia maledicta~~ 41. d. d. d.

all large rev. 2y. det. pec. limb. 10 y ago acute. short paraly.  
 turned to the paraly - rev. 4th. could not walk. but regaining some strength.  
 on same rev. when returned end of 88. 1800 broke down utterly. 1801  
 got wrestling fever - each time when walked a back came again the pain  
 & could not walk. not all at once. 1802. even after it could not move.  
 now must. par. could move. - loss of use of walk beyond a certain  
 point. after it then exhaustion of all power. - not read. but simply  
 he that. no form simply utter in. 1802. struggled in. finally  
 line. exhausted. broke down last oct. utterly. - now able to read in line at  
 line & can talk - cannot do anything. - can walk. but not  
 more than 100 yd. & 20 lb. at time. - legs do not give way. sort of cold  
 feeling - spine a pain in back of head. - Good color. Sleep well. eat well  
 good spirits. no ulcers. & cheerful. - have been shot & 'hygiene' and can  
 sing well & read. - does not walk any.

He is a healthy looking man; good colour;  
 tongue is clean; pupils are active, react  
 to light; general nutrition is excellent;  
 vasomotor reaction not very active; very  
 good expansion; heart sounds are  
 clear apex and base; Knee jerks are  
 normal; station is good;

Brain - Union -  
Lorally Syphilis

May 2 '08  
Dr. Promitt

~~March 1898~~ 2 March 1898. (Apr. 1898).

Feeling in hand quite stiff & cannot hold anything. began  
14 days ago - suddenly. but 1 y ago came back & could not use  
legs in hands much - espec. the right leg. Laid 2 mos. went  
out in chair - legs were so stiff - dragg'd leg. ever since. only a little  
at first legs red & swollen - hands so hot dropped things sudden-  
ly now ok. Dr. med. hygienic diet. & a very good diet & felt a bit  
more of slight increase. Began with a start mean & a spring  
in bed the teeth were set & lurched a great deal right side. Laid  
1/2 hour & then went out as long. - then after that a morning  
after. Left her for 4 mos. one Feb. began again a slight  
one & laid one. - more since. - better. but passing memories in it have  
- leg. otherwise fully well, can bed. Memory better. D.P. gave  
16.00 4 1/2 y. ago in the throat was at the dressing a wound &  
it infected. the throat was infected. was long in healing  
was secured - bone came out. Dr. Thump & possibly Syphilis.  
Dr. Beershall. did not think it specific - was incident of syphilis.  
found suggested it. - 9 y. low in system.

She looks pretty well; walks fairly well; no  
special dragging to-day; pupils are equal; no  
involvement of the face muscles; right  
pupil is perhaps a trifle larger than the  
left. both react to light; arteries are not  
sclerotic; there is a defect of nearly one-half

of the last joint of the right thumb; no scars  
specially on skin - one or two little ones about a  
centimetre in diameter and a little scaly on the  
surface; grasp is good in the arm; there is no  
disturbance of sensation; feels the difference  
between heat and cold; there is no loss of power in  
the arm or in the leg; knee jerks are markedly  
increased, more on the left side than on the right,  
no special rigidity; definite ankle clonus on both  
sides; well marked Babinsky sign; no rectus  
clonus; there are  $\frac{1}{2}$  dozen spots - two on the back;  
they are all flat, slightly raised; no indurations  
of the skin; no special copper colour; walks with  
a definitely spastic gait, particularly on the  
right side.



reaction active; heart sounds are clear  
apex and base; abdomen seems normal.  
no tenderness anywhere; Knee jerks are plus;  
tonsils are not affected.

Mitral lesion <sup>hauken tube</sup> . niles

Jan 9th '08

Dr. P. M. Ford

~~Jan 9th '08~~

Levent,

Constip. . mitral lesion 10 years. . always pain - sometimes blood  
all bloodlet up. - lost power. .

SD heart lesion. a. b. in end of a. d. mit. for. shunt of  
1st mit. jet. low mit. syst. in line over heart, a. ut  
pul. area, no aortic. Mit. mit. enlargement. Bond at  
pul. aortic. returned.

1) To have part.

2) mit. haemorrh.

# Enlarged liver

July 26 1899  
Dr. R. L. H. H.  
Muller (St. Louis)

~~John~~ 61 Chemin. Oxen

V. L. M. Aug. 1890 - had infl. 2 or 3 mi. in 95° slight fever 2 1/2  
4 ago now - had slight gas. lab. well had 1 mi. nit & ch. 16 h. after  
1 mi. nit & very red. foll. that in bed 42 deg. & a fever. 5 or 6 days  
jaundice. Then began med. 8 mi. & cured. 2 weeks after came in  
again. slow. lab. 3 mi. in 1 day. not much at all the fever. 5 mi.  
then pains to liver - 10 mi. after 6 h. eat. & 10 mi. after  
liver better. not much fever. Jaundice cured. a week after  
I saw him & not much jaundice. more 3 days after a slight fever 103°  
no chills - no sweats. - Jaundice - was now. - liver better. - doing  
slightly. 5 lbs. in 5 weeks.

Looks thin. Veins of cheek & forehead a little distended. Slight but  
marked jaundice. Tongue is clean. Pulse regular. Slow 64.  
Abdomen looks normal, a little thin. Marked throbbing in  
epigastrium. Distance between navel & ensiform. No pest.  
Well marked shadow of the descent of the liver on deep inspiration.  
Liver can be felt exactly 3 ins. below costal border in the  
Para sternal line. On the middle line it extends 2 fingers breadth  
from the navel. A little tender on left lobe which feels distinctly  
irregular. The edge is rounded a little irregular. No  
nodules on surface of the right lobe. Liver does not reach high.  
Large tympany is in 6th. Spleen not palpable.  
Nothlands relaxed in neck. Apertures just below nipple.

Soft apex warmer and head in axilla.

No caught.



The Apex beat just visible in 5th. Normal situation. Not forcible.  
No pulsation at the base. Slight impulse in veins of the neck.  
No increase in area of Cardiac Matness. Sounds are clear  
at apex ~~not~~ at base.  
In erect position Sounds are clear. Of normal relative  
intensity.

key x cedema = angioedema

August 3rd  
09.

~~\_\_\_\_\_~~ 53- Mount. 1.

3) wegen des kriegsden bogen war befreit & 34 y.

begin the treatment. Took for 4<sup>th</sup> time only. (a lady who made the diagnosis, Took it in a few more and to have in anal & anus. The swelling & internal even more. She had had a recurrence. now at home for 3 weeks in a row & faces. She is well - in hope for a good result or other day. Pain so great the time that she could not stand & in bed up to 11. Left side above down left arm & back to chest - she was 1 out of 2 in the night - & 1/2 in the day. She began now & took 4 1/2 per bottle in the day & in two days she could move & walk - & in the week - very much better. She is now in bed. If she does slip it once - but is so definite & painful. Now for your cable the subject for 1st & 2nd of each month. but now two days after the bottle in before the - (off hand) get much.

To write in a well preserved

V. characteristic facies skin condition. Pulse slow, regular.  
Tension good. Aortic 2nd sound a little accentuated, 1st is loud  
 booming at apex. Pain begins over 2nd left rib in a space which  
 could be covered by a plow. No skin  
 sensations.  
 Intire absence of thyroid.



47 40 parts (h 5 g. 2 mm.)

Story appended. - a lot of R. 7 ft. 9 out in f. h. f. M. ant.  
 left R. B. S. S. h. w. no g. ant. one rheumatic.

P. H. - no disease - nothing serious. no syphilis. no sh. fever. no fever.

Severe polyphasia. Excr. 5 and 6. but none to 10. 20-25 a day  
 Alcohol lamp - lily of the valley. Food in moderation. - not very clean in white and  
 P. D. left foot under foot under side. on wall of same lane. 100 ft. 3/4 in.  
 out before that lane. later. - 100 ft. 3/4 in. later. Excr. 100 ft. 3/4 in. later. 100 ft. 3/4 in.  
 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later.  
 in process in 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later.  
 pain. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later.  
 heel. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later. 100 ft. 3/4 in. later.

1. healthy looking man good physique - Good colour.  
 No tophi No joints Swollen. Good muscle. Feet are  
 natural looking. No swelling or redness when lying  
 down. Veins are not enlarged nor do they  
 swell specially after standing.  
 Heel looks natural. Just one point in centre of

heel that is sensitive, exactly in the middle.

no sensitive point in the right heel.

Dorsal arteries, pulsation well felt, in right & left.  
+ in both posterior tubules. Radials are full,

large, pulse good. Heart sounds loud booming.

No enlargement of spleen nor of liver.

Beginning of Heberden's nodes on left hand.

Sept 24. 1910. 3 months ago began - a - - up & down - - -  
of arm - has been increasing. - up & down not very troublesome  
- - - - -  
with it. G. H. poor. not any other symptoms. - - - - -  
bone. get any - "belts"

& is well good elbow. Shoulders look symmetrical no pain in  
rotation of the joints nor any pain in handling the joint a little

tender above the outer side of the biceps & down the back of arm  
at present no disturbance of sensation in the forearm itself.

no actual tenderness in the muscle itself nor in the course of the nerve.  
no special sensation of the ulna nerve behind. Muscular power good.  
no wasting of the muscles Heart Sound clear.

My dears

Sept 20 05

. Dr. Kneaz Taylor.

Dr Thos Taylor  
+ Dr Fanning.

thus

Norman Hotel

[illegible]

Locks well good colour. Nistagmus lateral. curiously  
variable. Much more when the eyes are turned far  
over. All the movements of the eyeballs perfect.  
The pupils are equal & react to light.  
No nistagmus. All the movements of the muscles of the  
face perfect. Movements of the neck perfect.  
Hands, no. V. M. trouble. No tremor.  
No volitional tremor. Perfect control over  
movements of the hands. Feels the slightest touch.  
Steriognostic sense perfect. Tells coins well. Tells  
difference in weight. Station is good. Stands  
well on toes & on either leg. Gait is  
good. No special swaying. Falls as if the  
were drawn to the left. Knee joints jerks are active.  
No chin jerk. No amblo clonus. No bibinkhi sign.  
Arteries are normal. No thickening of any of the  
vessels.  
Heart not heard.

Miss H. H. H.

# Neurasthenia

Sept 29th '89

5-140gms.

~~Neurasthenia~~ 36. Seddington run.

very del: nothing long - 12 or 13 - great ch trouble, as general  
 want. sleep always delicate. nerv. (both sides). not married. lives with  
 mother. she has epilepsy. 7.0 of 13 yds. 16. W + strong. Eubene & 5. ago  
 not still in Africa - but when came back. on & off - not very well - last y -  
 better. - feels on body - all sensations. persons of sensation. a day or 2 days  
 (1) Stomach of breath - feels cannot breathe. cannot breathe now. you see 10 feet  
 from on back of head. & body. (2) swelling in skin. & blunted. - some times  
 (3) Stiff of neck. (4) Chilling - air passing. (5) burning of eye & chest (7)  
 never heard of disease. (8) Not in going to die (9) incommence on 5  
 (10) acidity. " numbness of fingers & hands in bed. 12 shading pain  
 in arms. (13) Stiff - 1 arm (14) 1/2 feet in your face. (15) Penetration &  
 eccentric in family - Has lived a very regular life perfectly healthy  
 life. Mark of cancer. & very high sleep. no one in English like me -  
 great volume - up & down. (17) Feeling of cold warm in back (18)  
 Throat coming (19) Typhannitic climate (20) sudden drops.  
 as if no winds. (21) Accouch. (22) Dryness of tongue at night  
 no loss in W. is there. - affect. good at night. sleep. Head. Has  
 heard for order - say reader. & does. always, no work. - when well.

He is a nervous man; fairly good colour; pupils  
 are widely dilated; Contract actively; tongue is  
 clean in front, furrowed at the back; hands are  
 moist; muscles are thin but hard. no tophus;

abdomen is flat; Stomach tympany is low; organs relaxed & somewhat dilated; the liver is not enlarged; Spleen not enlarged; heart sounds are clear apex & base; glands are not enlarged; vasomotor reaction very active; Knee jerks are very active; Station is good;



no pain, no swelling about the joints no tenderness behind  
Lifts both legs well. Right is ~~set~~ down less easily. When the right  
leg is exerted the whole pelvis moves, & in certain positions,  
particularly on rotation it is painful. Marked difference between  
the two: the left leg can be rotated easily. Tender directly  
over the head of the acetabulum. Heart sounds are clear,  
pulse regular, good volume, good tension. No enlargement  
of the liver. A little tender just below gall bladder. No enlargement  
of the spleen.

~~26. 14 Rue de Sevre Paris (Boston)~~ 26. 14 Rue de Sevre Paris (Boston)

not over well. since Harvard 1901. Suffer much. indy. urine. -  
 more or less sedentary. slants the chamber, and fatigues. not over well  
 due to cold catarrh. Bad sleep, - before - Pain. in back left back & left  
 always in same place. & same manner. Began 10 yrs ago. ~~since~~ since in  
 spells - last 6 months. made a month before. last into 13 mos ago.  
 not since. Dr. Harrington. Blood - not. - not gravel. went 1-2 yrs.  
 issued a small stone. Then from a bad attack - Sept. one drink  
 whiskey. - - - warmed, 6 hr. measures. & could keep awake at  
 night. & at 2 am. and a bad 2 or 3 days. - one spell. 20 - say - 24 yrs ago  
 no stone - not since. Then in f. appeared after 1-2. no change.  
 not jarred. not never passed blood. - In Sept. attacks & much pain.  
 at Dr. Rausch. moves shaking. hand walking. truly same. 8 months  
 after no spine. - bed only. came in & asked all night & next day.  
 not much - stay in bed - account with chill. in the morning time -  
 before the pain of the begins. Fever goes up. - better - some a bit  
 better & while & the usual thing. I've had a lot of what urine -  
 no actual - no down - the urine. Sometimes an enormous  
 amount - a bad urine before the attack half - but not. One is  
 shot at 2 am - part - built & discharges feeling in abdomen  
 after a couple days. and the pec. when chill should adhere it - Headed  
 not. Bed no. 150 - 140. not much.  
 Good - same has. - Dr. Lir. 4 - D Brought Bz. S. & v. a. S. -

Looks better well. a little thin in the face.  
 Color of lips good. Pulse regular. Vessels healthy.

Abdomen looks natural... Flank lines unequal.

Sophansia food in lower Zosacic zone. Descending colon  
very easily felt. Left kidney not palpable. Nothing to  
be felt, and easiest bimanual palpation.

On right side kidney not palpable. No friction over  
the flank. No increase upwards of the

kidney - - - behind.

Headaches.

Nov 12/10 09.  
Whitehead

Mrs ~~Whitehead~~ 29 350 Banting RD

Headaches, had all life - 3 or 4 - <sup>Mr. & 4 can. no bad for</sup> not so bad as one started  
for 6 years as bad. - came at monthly period - most often. Other  
never a period without - not for years. - Vom. but as always, goes  
back. - 1 or 2 occ as 3 days, & often we agit. - never 3 mos  
without - never a fortnight - frontal - none. sometimes one eye.  
eye not weep. - 100. Mother had as young woman - but was.  
not now. 10 to 15, but all suffer with headaches. In Eng. 4 1/2 yrs  
from mother, never why before. in whole week. Vision not acute;  
blurred. hand - 4-5 - music on my hand.  
Diet with - sub - never on reg diet - no good - living country life -  
now meat - we a day - Last winter 1 head - week - better as  
for. 1st 3/4. water in air with feeling of headache is heat  
in night & dreams of it - has had 1 in 10 years. - come on any time  
even in air here will be frostbitten. - so has had to walk down  
for hours. - then, a good diet. sub. as one does not take anything.

(1) Reg. diet. sub - meat & milk, good mammalian. Potatoes.  
allies.

(2) 60, 100.

Healthy looking good colour. Tongue clean.  
The temporal arteries a little sclerotic, radials normal  
just halphalte no distension of the abdomen. Not enlarged  
no dilatation of the stomach. The lymph is a little high.  
Heart Sounds clear. apex base.

Gout. & Gphei.

Dr. Griffin  
Baltimore,  
Jan. 12. 10.

37  
~~Wm. Griffin~~ Baltimore.

Gout - for 10 - 12 years. 1st indic. feet. 1st Rh. had 1st attack.

Occup. Scales cattle & horses. not in life. 7. D. 37. age 75. not. had gout but for 16 y. before had not a word - no tophi. In acute w & 51, 70. no gout but themselves. Knuckle & wrist - 1st. B. G. Sg. more the gout. Pat. is the 4th. Stable began young bear - & has sheep - it has had a rare bit in his life but of sheep. would drink 2-3 snob. whiskey. 8-10 glasses. none now for some time.

Attacks has had many attacks attacks - in 6 or 7 years. now feet. don't feel - so still. T. up in some cases. 3 weeks at a time. a very tender area. not in big lots. knees & ankles & shoulders. & the ankles. good apt. sleep. some Oct. 20 middle. in summer. pretty bad. Put on made around. v. h. c. R.

Healthy looking man good colour. marked tophi in both ears. Large tophi over knuckles & index finger; large one in left elbow. There in elbow came first. Both ankles are little swollen, the right more than the left. The wrists are distinctly swollen. Big toe joints are not specially enlarged and tender. The tissues about both met. are swollen.

Both joints creck straight knee. The right wrist is just recovering from an acute attack, a little livid now & swollen. Does not hurt

now. Awake since it was involved. Swelling of the outer side of  
right thumb. base of the tibia lamellae broken.

Small tophus just over right external mal. The Achilles tendons  
are free. Pulse regular 64. Arteries not thickened.

Heart sounds are clear apex. A few wheezing rales in the bases.



Mitral & aortic disease.  
Ang. pectoris <sup>fract.</sup>  
Kant

May 3rd. 1910

Dr. Hardie

~~Dr. Hardie~~ - With 70

C of Heart. as now nothing - I recall faintly - pain  
in breast - my heart as 40 years valves not yet - have paid  
any attention till last 2 years. Subject up well - pain - never -  
bed all day - not up neck or down arm - In centre of breast. 2 or  
3 y ago. motion acc. & heart should not. To day. when going to university  
had to <sup>but</sup> if heavy - water riding in train peak more. Not  
at night. Sucks camp. Goes to town every 1/2 day. - Had attack  
in 1906. - no more than usual. I suspect causes the 2nd. eating  
heartily. - very care, at - brown regular. - light down ever.  
just.

Dr Van Gieson said he had mitral disease  
40 years ago. (Father of Dr.)

P. 72 full & regular.

1. To go slowly.
2. Nulmoly.
3. regular diet

Healthy looking man; good colour; young looking for  
his age; pulse regular, good tension; arteries about  
his own age; temporals are quite soft; radial pulses  
equal, no arcus. Pupils equal, react well to light.  
chest well formed; marked prominence of the sternum;

no pulsation. Heart impulse not visible, palpable just below nipple line; not forcible; no thrill apex or base; loud mitral systolic, first heard at axilla and round to back; maximum just above apex beat second sound heard at apex; loud aortic systolic heard up manubrium and in vessels of neck, more intense over manubrium than at a.c.; soft aortic diastolic just audible; no throbbing over manubrium; no pulsation; no tracheal tugging. In recumbent posture mitral systolic much intensified. Lungs clear; liver not enlarged, edge is just palpable; spleen is not enlarged.

*hurry note*



more  
little <sup>more</sup> prominent than left. Respiratory reaction very active.  
Large difference between the 2 apices on right of patient.  
Right. Occasionally very visible at end of inspiration.  
Breathing normal. Heart's action is clear.



Arthrosis spine

Nov 10/1910

no. 57

Miss [redacted] 62. 28 Walton St,

came - to you about - head & arm. spine - always -  
 heavily along spine - but went about & did several dead. The tendency  
 brought down - on step of trunk - fell in bed & as is often happens  
 on this tendency I went in - - almost out of pain - & another strain &  
 another accident. slipped & fell on stone floor. 1907. & two. approx. more the  
 nerve of spine & began with. but this never came since 1907 that lead  
 on certain aspects. Sens. numb. in back. Especially in legs affects lower  
 part. - lumbar curves up on it. weather up it. app. good - del. degeneration  
 low very del. always brachitic - in winter - always a more or less. Nerves at times  
 I know it - not the lungs - always chilly - & very sensitive throat. Can be of  
 the lungs - not the spine. Cannot get broad enough to go. not to a point  
 of it that the legs are affected. - cannot go to early church -

Looks pretty well. Tongue clean. Spine is a little bowed.  
 marked difference between the two sides in the lumbar region  
 marked flatness in right lumbar region, feels it just  
 about the beginning of the lumbar. No special tenderness along  
 the lumbar bones. Does not stoop well, the spine moves  
 altogether, nor does the spine - move back well. There is  
 nothing to be felt deep in lumbar region in front.

Nov 13/10  
S. Birch

Mrs ~~W. W. W.~~ 53 Mason Farm, Warburton.

2.7. ago brought - recd. a pair in tail of head. <sup>has been seen and left.</sup> & sent to see A. D. ...  
 he found. returned both eyes - flame shaped membranes. etc. suggested H. I.  
 to the left for 3 mms. & red. ... Has continued. ... Head has still  
 no localizing - alt. slight low st. grand 1015. has eyes less prominent  
 periorb. & an antenna - no fibrous. not as acute but more uniform.  
 sleeps well. not troubled with itchy or there. H. I. for 3 mms. no change  
 Mex. ... not large amount of urine. V. L. woman. 11 children. youngest  
 boy has 5 wght. & not died. & one miscarriage. no dasy. no Sch. fever  
 as girl. - no other serious illness. v. h. ... v. w. ... in ...  
 came. ... weight has gained. ...  
 ... blood. ... writes that she has ... & feeling  
 dists. The ... has been going on for several years, she gets ...  
 times. ... is now at home -  
 1. very pale. hands & face.  
 (2) no increased ... in ...  
 (3) Heart normal - ... at base.  
 (4) N. S. ... not ... .. no ...  
 no ... ..

To see whole ... & have a ... ..

Neurotic Headaches

Dr. Bartlett  
Waddington  
Bayburg.  
Nov 26<sup>th</sup> 10

Mrs ~~Elizabeth~~ D. Coetz. ne Leamington

Head - pain for years. from child had cadaver - 30 years  
at least at first in left side only - now all over. not in pain m.  
well. B., S., W. & S. the same del. as child's well. Head when severe,  
not badly. comes in bed. Head same as child's. Till half grade longed with chest  
but everything does unless after the pain - just a heavy feeling now. no loss  
in w. no nausea or vomiting. Eyes sight good. hand. glasses. at very  
times of letter or newspaper. has been clear in head etc., feels it very dry.  
genuinely feels it for days - a small at least. See grey. not loved. Chest milder  
but rarely. Throat, after this began. the right the half of eye  
brown & better eye back on left side, more half hearted grey - a  
scurious so.

Grey curran - deep fluster of impotence. in neck

Looks a little grey. Tongue clean. Pupils equal, react well to  
light. no sclerosis of arteries. no high tension Heart Sounds  
clear a. b. ~~not~~ with a loud mitral murmur, 1st very sharply  
valvular. Apex beat is a little outside the nipple line.  
A sharp rough distals also at base. no enlargement of liver.  
Spleen is not palpable. Stomach timpan, not increased Right  
tremor of the fingers. no enlargement of thyroid. In erect  
position the murmur is not more intense. The thyroid is a little full.

Aug 9. / 11

~~5~~ ~~43~~ 43 ex-les 50 yrs.

Mr. ~~43~~ - sent up. 6 mos. up to married. but came  
 somewhat v. h. m. no great vitality. hard worker. but 1/2 of pressure not  
 fully occupied. 57 H. & died 70 M. Had 4 s. B & L. 9. one dead 5 in fam.  
 Tobacco heavy smoker - under use. Alcohol. very moderate. 9 or 10 in 1/2 white.  
 Ex-ls are vigorous. Tenses & S.R.

Dist. of Sex intact. - Working 1/2 night with ex-ls. even to marriage not too  
 much. Eng. 5 mos. - Eng. came as rather a shock. at bottom is wrong. - during  
 20. man has father - much depressed - carrying him at home & goes out 1-  
 half hour p. Sister. 7 years dying. mother has illness. 2 Sisters married  
 2 Brothers - married. & about 35. - M. very des. illness - 2 or 3 years distress  
 - intensely religious - a saint. "For me an ideal husband period" & within a  
 week of mother's death engaged to - with whom I had not seen since. - Carefully  
 together. She is 22. - Her June said could not give to must work more - too busy  
 for 3 years. Off work this year - but the girl interferes with work - not forget  
 - & called with. M. parent - bringing up by training. used about. till 2 yrs.  
 ago. (I saw her) "She is an aristocrat. & in addition - beautiful  
 - & in comes near a perfect person. & a very strong mental affinity.  
 with good & intelligent habits. - can't see right to do anything.  
 "Red-haired girl" & a first."

Remarkable case - was yellow - mothered & cirtored all his life -  
 but a sudden infection - was full of dark - and - perfect passing of brown  
 comes over him. He said frankly is felt the dying - his father & mother  
 1) have 6 mos. probable. & at end of the time - settle.

~~Miss as follows.~~

~~Miss as follows~~

to Ryde

~~See with.~~



Guth.

July. 28<sup>th</sup>/11.

No. ~~1000~~ 57 Curo.

retard a certain number 3-4 days of left hand - about  
10-12 days ago. never very dry when began. not in day. not much in  
dressing - no feeling - not in day. not in day. not in day. not in day.  
no strength in fingers. Can now write with right. could not write  
only in fingers. not in other hand at all. not in right. no strength. no  
control of hand. but can now write with right. Had R. arm  
very well. Has left. from left. v. h. up. July. 30. has very much  
v. healthy. Habits. - Good - is not for a year.  
Left hand. 2 now can write. not in right hand. not in left hand.  
Guth in family. but all the 23.3.40. that a spring.

Looks well. Good colour. Noting to be noticed in either hand  
Has all the movements of the fingers of the thumb. Can  
extend them flex them. Has good power of resistance both  
to opening & closing. Picks up a pencil freely -  
easily. Writes the name easily well. Feels the touch  
but not yet quite naturally. Speech is good. No incoordination  
Strength of the arm good. Knee joints normal. Pulse  
regular, 80. Good volume. The artery is not palpable  
The blood pressure is not high. The brachials just  
palpable. Pulse equal. Feet actively to left.  
All the movements of the facial muscles are normal.  
There is a well marked tophus on the tip of the left ear.

Heart, a. b. not palpable, not visible. Heart Sounds clear  
at apex. Aortic second is a little accentuated at base, but  
no murmurs. No pulsation at the base. Liver, edge is just  
palpable, not enlarged. Abdomen is normal. Tongue clean.

Eubothris 2 =

July, 28/11

D. Branson.

By. - man.

Has ~~2~~ 1, in house

mus. for long time. Has white. "for years & years with  
deserving." & 5-6 yrs. ago much mucus. "rather old looking" & nearly 5-6 yrs  
or 7 yrs. ago. high one in house, & 2 mucus with acros. After. in  
mildly respect. greatly had mucus. not much mucus. feel mucus.  
Head green. about 2 mucus go for a while. Had. appearance 3-4 yrs. ago. 6  
6 years ago. "for some time" & cause & the white. Better but much  
depression. not as much pain - not as much. white. but much more. & still more  
mucus. 2 or 3 times a week. mucus appears. 3 mucus ago. not of color for  
long time. head down. to talking. Digilatin. Best weight 136. 20 years.  
now 125. 2 children 9 & 6 1/2.

about. banding.

2 Blunt bill

Looks body well, a little thin in the face. Colour of the  
mucous membranes a little pale. Blood looks a little thin  
blue. Pulse regular good tension. Apex beat just  
half palpable inside the nipple line; not forcible.  
Heart sounds are clear at apex above.  
normal relative intensity, no accentuation of aortic 2nd.  
A little tender in the neighbourhood of the apex.  
Descending colon distinctly tender. Liver is not enlarged.  
Lower part of bladder not palpable. Abdomen a little  
relaxed, tender on deep pressure of the umbilicus.



not found. After 10 days the animal - function.  
Faintly clear, No real food - 30th and  
accustomed.

Dec 27th. no any. still without - no day without. unclear with them  
not open vomit. -  
- N. & G. did not agree - last for 4 weeks - some with headache, some  
also with more. 2 - some as last - blood went to head.  
Ergoster. it was better for 2 weeks & in that time - did good - had  
freedom almost - but - had me all the time - then when sleep  
began did not do much more. Has been taking Bx. 100 for 4 years.  
I examined 4 Dec 28th. T. 100.5 - 3" - 1st difference in my belt  
with a bad case - last 12 hrs & nothing stops. not forming of tongue.

- 1 - to try the medicine.
- 2 - urine to be examined again.



day - a series of ... feelings ... Th. ... effects ... only 4 ft.  
small ... of ...  
7. ... of ... m.v. ... B. ... no ...

Examination for IV T.D.

Strongly built, muscular man, weighs 145 lb. Excellent  
muscles - Face a little pale. Tongue clean -  
pupils equal size, react actively to light - ocular  
muscles perfect.

vaso motor reaction a very active.

Pulse regular - heart sounds clear, A. & B. No

Tenderness in head - no difference in percussion in  
different sides of the head. Spine straight. No areas  
of hyp.

Knee jerks present, not active.



at present no great tenderness and no swelling about  
the joint itself. Tenderness is under the trap. and  
in the supraclavicular space. No wasting of scap. muscles  
behind. Left scapula a little more prominent than the  
right.

Pulse good. axillars palpable. heart - normal.

Hampden

Jan 15 - 1913.

~~Jan 15~~ - 6 Rusten village.

6 w coughed up blood. 1 incl. 13<sup>4</sup> up into sitting studying  
mch. felt cold - Sanchez dumbbell - & did violent ex. & felt a knock in  
lunnet - & that at one little arm out of hand. in to cover 1/2 temp. vert  
t bed. 12 next, dy. was infling & smaller & some way cough up blood  
went to the doorway & 1/2 a tea cup - incl. tonight - "inly that" - "Sure  
it came with cough - no cough before. 6 was before in rooming very  
hard & tonight a little. it was to... no cough. since. has been  
coughing things highly - no cough. - no fever - no sweats. Has been  
in weight.

7. H. 7. & 11. all night. Live in Bedworth - Newcastle. 2. b. no s. 2 d. then  
at 30 night of hemorrhage at 20 - & 50 consumption. has "weather get up  
than me".

Healthy looking, good col. good. polyphic. yell. card. good. respiration 9.  
Chest well formed, appars. pd. clavicles equal, appars. same at apices.  
note is higher pitched on clavicle + r. superclavicular. but not more so than  
is often the case. Inspir. at ap. less full & breezy, but when he draws deep breath  
air enters well & freely. no change in rhythm or pitch, no adventitious sound  
quite clear in the ribs. Behind there is no change to be noted. enter  
precisely, no rales on expir. no change on percussion note.  
Heart rds. clear. ap. b. in normal situation. Liver red incl. spleen normal.  
lymph glands not. incl. pulse 8 - 80. of them, no change in arteries

Dr. H. H. H. H. H.  
Jan 13th 1914

~~33.~~ 33. Lumbago - above 5 gr.

9 am. 4 9 a.m. - no trouble after the 5 gr. - no articulation

7-11

Jan 18th. - no des. at once but severe pain. felt in of back bone was  
broken - & was 200. & stiff next day. Some felt morning & pain in  
inside. 2 or 3 days after the accident it. not so visible. Some - nothing  
about all the time - men were all very. Some out. Some back  
& in with it - in with it. In with it. In with it. In with it. In with it.  
A kind of a. in left side + very nothing - end of left.

Put in in - 5 gr. till Dec. when began - & 4 gr. more. pain more at  
Dec. in Lumbago. but. & act. causing. 3-4 hours - causing. some very  
time. & pain more. Had to discontinue all more. rest again. & had  
to have morphine - at night as much as 1/2 gr. - a week. no pain  
as at - with.

Healthy looking fellow, good colour, atti

Obliquity is very marked - a deep indented left coast

and normal right side. Marked atrophy of right leg both  
above and below knee.

Measurements +

From behind the obl. is very marked, lateral curvature

From the obl. is very marked, lateral curvature

From the obl. is very marked, lateral curvature

From the obl. is very marked, lateral curvature

From the obl. is very marked, lateral curvature

From the obl. is very marked, lateral curvature

From the obl. is very marked, lateral curvature

on sacral spine. To sit down is one of the most painful things he can do, particularly after standing long. In recumbent posture - the wasting of the right leg is very marked. Measurement - L.calf close fitting, exactly 18 inches; corresponding point on r.l. 14 $\frac{1}{2}$  inches. No affection of the joints, no swelling, skin looks normal. muscles are fairly firm, even in the wasted leg. Inguinal glands are not enlarged; nothing to be felt in either fossa. There is no tenderness in front below Poupard's ligament. He turns with difficulty; marked difference between two sides. Tender down the right side.

some Insuff.

1st Course.

Jan 16/12

~~38.~~ 38. C COX. (Sun. 10. 12. 13.)

- V. h. m. no S. ill. & rest. Sph. as child. no. S. for. M x 12 Co  
new only. Billed. crisp at a lady's football & hockey, & was said 7st within  
10 y ago went to Dr who said <sup>near 1000 ft. a day. not as good as</sup> it was breath. no much. int. in. all  
2 new age after hard some of hockey. comes several at night &  
when dropping asleep wh. is the most trouble. heart heart beat.  
not much palp. but feels & occas. Sph. of breath when run but not  
much. Last night a little shoky. Feels well. Underhill read head and  
Colder passed for cadetship at 23. at 8.  
1. ap. beat in salt water - no think.  
2. ap. eye like & trans t. axilla.  
3. at base. usual. soft at a. carb. & under at pulmonary  
down the sternum to cruciform cart  
4. not a marbled Cernigan.

17. one in life.

Neurasthenia

~~Jan 21/12~~ Jan 21/12  
Brockton - Savoy  
Jany. 26. 1912.  
Dr Pratt.  
From Dr. Frowse <sup>in London</sup> Singapore head -  
"madness".

7. 4 ago. new breakdown. & in a new cond. ever since. a few  
years did no business - 3 1/2 ago lost up again. workable & last  
Java sleeping. Last year when out then, reading books, & in heat  
& exhausted, can't read, nervous - very uncomfortable. Then in the winter  
down. & in 10th. assuming heavy responsibilities, & 4th work. new strain. but  
& 20 could. not eat - lost 50 lbs. every period of 1-1/2 years. "Flesh rotted  
right off me" & the depression moved. Consulted Dr. Lloyd & Dr. Ch. went to  
Nayana (Coblenz) Dr. said "acute neurasthenia & hyperacidity" - no vitally  
Singly. Same month - improved. Sept. this year. Dr. Sallan Ferri - said  
diagonal ulcer! Then failed & in start crash at Southampton. 2nd day  
failed. 3rd. before sudden death & crisis. Neighbors run away - & in some  
state. Gradually better. gained. 30 lbs in weight. but Pres of Co asked to see  
Dr. Calver F. May N.Y. who has helped me very much - & said "let it  
come again" - Gained. Dr. Pratt. wanted to come to Hospital & Pres &  
study case but could not. & he advised to see again. was well in voyage - shades  
with cold & slightest procedure - aggr. cold in ears on both. feet & hands  
swells. - feet. & when so weak very freely. Coming over. cold & apert. - Aff.  
good. D. g. well. is certainly better. at night has flatulency. motion right  
colorless - yellow - not brown. no diarrhoea. Sleeping well as rule. Varies  
of not so cold sleep well. Sometimes in head & sort of giddiness. Dr. said acidity  
& a dead little party. - Exam. was over all right. much flatulency. & 6  
7th. 7th. & well. 77 & 76 & in. both versions. B. 1. S. 3.

was worked hard. - began at 18. - very ambitious & now in a world & not big enough  
to do it. Gently exposure of head.

P. 72. no use of tension.

1. V. h. - working man. V. good. no tension. stomach - but inflated. no col. of  
liver or spleen. V. in - reaction + +. profuse wound.



Walking, upper 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

Standing pos. after - 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

on passing, 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

Recurrent. Flutters on upper border of 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

Respiration. sounds clear at apex, of normal intensity - this is just after exercise, relative to the sounds heard. The murmur at base; 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

During whole exam. no escape.

In course of exam. sounds are heard better

Exam. of abd. neg. liver not enlarged. spleen not enlarged.

reflexes normal, pupils react well to light. heart sounds.

Joints of fingers a little swollen.

1. Go ahead - late - 1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15. 16. 17. 18. 19. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35. 36. 37. 38. 39. 40. 41. 42. 43. 44. 45. 46. 47. 48. 49. 50. 51. 52. 53. 54. 55. 56. 57. 58. 59. 60. 61. 62. 63. 64. 65. 66. 67. 68. 69. 70. 71. 72. 73. 74. 75. 76. 77. 78. 79. 80. 81. 82. 83. 84. 85. 86. 87. 88. 89. 90. 91. 92. 93. 94. 95. 96. 97. 98. 99. 100.

2. blood - pressure low. a little sluggish.

3. food - a little indigestion.

4. sluggish.



Colour pretty good. Looks thin. No fever. Clavicles are equal; expansion the same on both sides. Resonance little defective over and above right clavicle. Very-where else clear, but no change in respiratory murmur in front; sharp and distinct, but not tubular; no râles. Behind, everywhere clear; expiration not prolonged; no coarse râles. In the outer part of both lobes on coughing and deep inspiration a few crackling râles.

Aug 5<sup>th</sup> - 12

Dr Gunning. 1/2  
Dr Bunn

Germanium Pa

[illegible]

Calmer

P . t . o .

Very healthy looking boy, good colour, well nourished; pupils are equal, react to light well, Throat fairly healthy, tonsils a little full.

Abdomen looks normal, no peristalsis visible, no special areas of distension; Liver is not enlarged, spleen not enlarged. Lower limit of stomach twangy just at the navel. No special tenderness over the small bowel: large intestine easily felt, can be rolled under the finger: stools normal. Head of caecum easily palpable. The right kidney is easily felt. Upper limit of liver flatness on 6th.

No difference between the sides of the face; the eyebrows are even, shoulders are level. The right arm is a little longer than the left, not noticeable when he puts his arms out; practically no difference on measurement. Not more difference in the hands than normal; no apparent atrophy or failure of development of the left arm. The spine is straight; movements of the spine are perfect, His legs are even; movements of the legs perfect. No difference between the two sides of his head. The chest is well shaped; no depression, no difference on percussion on the 2 sides. Marked increase in the of the right upper arm, not in the left; no difference in the muscles on the two sides. Heart sounds are clear at apex and base. Apex beat is inside nipple line, normal. Muscles good and firm.

Ch. Int. hept. & by heart-

Sept 9th 1912

D. Carmichael

62. 1/2 full.

c of restless & ungait - not abt. of breast - not wheeze - always sleep in left side - began wheezing & on right side heard beat "not in air" & under 1st cart. hand slight when down over heart. not reg. pain cannot get sleep. & pain in knee. (Carmichael's account for a cons. man). Eyes faintly noticed some mov. before ang. - vision blurred. appetite deg. sev. Pain under at rest freq. at ungait & not more? Not abt. of breath in chest, about. asthma per glass.

not back in T. Bruce. checked. To 37 good deal of been 6.5. - 4. "Turning up for port." Whistling. then for years. Intubular time 1887. Dressed back in '90 found large 8 in across in back. but all right. Put in 4 paper jersey & sweaters. uneasy down leg. 2nd in family. 7. died with. & knee. 66. 2nd. of soft of brain 54. B4. S. knee. - long slender. young at back dead of gut. & heart. dead of a hard dis.

General nutrition looks good; perhaps a little pale; pulse regular, good volume. No swelling of the joints anywhere; no tpm. Arteries are not sclerotic; only just palpable. pulse tension is not increased. Apex beat is in 5th about an inch outside nipple line; visible, but not very forcible.

Chest is full, rather barrel-shaped.

Lungs are full, practically obliterating heart and liver flatness.

Soft systolic at apex, not obliterating first sound. Aortic second is not greatly accentuated. Soft bruit at base; no murmur in neck.

P.t.o.

Liver is not enlarged, edge is just palpable.  
Spleen is not to be felt.  
Glands are not enlarged.  
No swelling of the feet.  
Not tender behind in the renal region. Neither  
kidney to be felt.  
In the sitting posture the apex beat is diffuse;  
murmur not more distinct.

Gen. appearance much better, colour good, pulse is regular, a little rapid,  
tension does not feel so high. Soft apex beat, aortic 2<sup>nd</sup> ringing, tricuspid enlargement,  
lungs, no wheezing, ~~there are~~ in tubes either in front or behind.  
Standing - no special change in heart sounds; no great accentuation  
of aortic second.

William Lawrence

Oct 23. 1912

Dr. Daly.

Hull.

Miss ~~Lawrence~~ 5'2. 148 lb. an. 29 years. Rd.

Had her head down 29. cgs working in stone. in stone work. Had  
her 24h. & head but - "her cardio spasm out". But better later. feel legs  
& head - have no harmony - helped. D heart. no sensation. no R feet  
all life. her all. has worked very hard. & intense. Chorea so near 12h.

1. Heart
2. certain
3. Bowels. - 2nd
4. del.
5. sleep very. high.

Looks pretty well, colour good, no cyanosis; pulse a  
little rapid, triaxial rhythm, tongue clean: marked  
arcus in both eyes.

Wide spread cardiac impulse lifts the precordium 1.5  
above first rib; in the lower sternum the shock is  
easily felt; no definite thrill; marked systolic at  
base carried along l.s.b. no murmur at tricuspid area.  
The systolic is propagated along l.s.b. and is heard  
faintly at the base.

Liver is not enlarged. No hepatic pulsation. No  
swelling of the feet.

Cohi - probably, Hancock

Dr. Hemenway

Had

June 1/14

15. Had denham

3 1/2 w ago seized with violent pain in abd in waist  
line - at rib - no vom but felt sick curled over 2 hours  
to night. no diarrhea with it - very severe. Never like it.  
before & rest last summer holiday - shot a shark, 5 lb over  
denham weight. In the 3 w. has had very - no a week long  
body. Food no difference. - only milk. - no other for  
V. come this week - slight itching this time. Had pain  
V. w. there. No pains in joints - no spots - Had  
red patches 5 years ago. was in bed 3 or 4 weeks. No  
pain there. No spots since... no more.

Looks little pale and thin. Tonsils dilated: tongue is  
little white. Abdomen looks natural: no distension.  
it is never low down: a little tender on pressure over  
the stomach. Liver is not enlarged. Spleen is not enlarged.  
Soft apex murmur. No swelling of the joints. Inst-  
motor reaction is not very active. In the erect pos-  
ture the systolic murmur is scarcely audible. Tonsils  
are not enlarged.





mur disappears at the apex: at the apex the sounds are very loud and booming. There is no enlargement of the thyroid. The superficial arteries are easily rolled under the fingers.

Fanner

33. Huntington House. inhibitor - 28/10/14

Pain in the intestines. first had it 2-3 days ago - not bad at all with it  
same thing. 5th came last 6 mos. not bad at all. Comes on all times usually  
more at night, is in the centre. Moves up & down. not taken. ~~and~~ then next morning  
all night. Had a large and small. Ever h: good not list in air get partially  
inflated. 10 am 12 mos ago not much. 12 mos no difference. - then tried a great  
the same. Pain border line. - in an hour over 100 at least were up  
thick with no more for a couple days. Otherwise very well  
was breaking out in spots across. in sitting an apple was still  
there. Comes when has the pain. will come out with me. pain, will  
come out in waves. sometimes badly - covered. - were broken  
in waves. not in waves has a lot. <sup>He has inflamed in all the way as blood in the stomach.</sup> has spots. for. the as big a hand  
spots - always the same. in waves daily to long - long, & red. white  
in the legs under a week. & will also in skin. 10 ft and in  
feet. now and then. 8 mos ago. and in skin. only after  
months. always as a tendency to stick along & back.  
Indeed the spots - and varied & red & white as no other members have it &  
1. V. w. with man. - good & over.

2. over legs old & new. - no fresh spots - few scars on skin. many scars  
at Guy's Hospital. Sister  
she has attacks of
3. arms - brown patches - dead & new
4. abd. 1st normal. no. in the felt. - then black - a lot under in 2-10.
5. head & ankles normal.
6. urine clear.



She looks fairly well; colour is good; teeth are not very good. She has five spider angioma on the one hand, and one on the other. She is thin, but the muscles are fairly good.

Abdomen is a little distended in the hypogastric region; marked excavation between the ensiform and the naval.

Normal descensus of stomach. Fullness is equal in both fossae. There are marked B. Bor. in the lower abdomen.

No special gurgling felt, and no/coil of the descending colon felt running definite

over brim of pelvis.

The head of the caecum is not felt; appendix not felt.

Liver is not enlarged; edge easily palpable.

Upper limit of stomach tympany on bth, extends to just above naval.

Normal peristalsis heard in small bowel.

Heart sounds are clear.

Pulse regular.



She is a healthy looking woman; tongue is clean; slight puffiness of the eye-lids; no tochi, no swelling of the smaller joints. The skin is a little dry - no scaliness at all.

The Thyroid is small, not felt on either side.

Heart sounds are clear; no sign of enlargement; no forcible pulsation.

Pulse is reg., good volume.

Arteries not palpable.

Abdomen is soft. Liver not enlarged. Spleen not enlarged. No tenderness of either side.

The back looks natural; slight difference between the two sides; a little fuller in the right interscapular region, but the line of the trapezius on both sides is equal and the outline of the shoulders the same, but it looks a little fuller over the whole of the right scapula.

A little tenderness over the spine in the right interscapular region, and as one puts the hand over, a little deep fulness.

Has the same sensation on the left side; feeling of numbness and coldness, and distinctly tender on both sides of the spine. Can twist the spine, but feels a little stiff.

Can twist spine on either side; there is no prominence of any one of the spine.

Knee jerks are present.

Pupils are equal and react well to light.

Throat looks normal.



Aphasia?

Nervous aphonia

5. 30. 14

Dr Parkinson

London.

form of mental aphasia, it me. can, stammered (day <sup>in</sup> may)  
3- mos. before began to feel it. Suddenly found sort of thickening. - & says  
words oddly. Suddenly lower & lower & finally almost dumb. - & recently  
very unwell. Pyorrhea. ~~from~~ Colitis. - not badly. Loss of speech 2 years  
ago. Other day, 1st call - 5- pm (at 9. rest. - can speak, but with effort  
Dr. S says. Brownian consultation - (Dec 27. Antibes - 4 months) - better.

She got here at 2<sup>15</sup> & talked incessantly till 2<sup>55</sup> I could scarcely  
get a word in edgewise. She said she had Broca's aphasia. It is  
evidently a case of a ~~natural~~ high strung nature overtaxed, by  
1 domestic worries - dual family 2) too many calls upon a  
very valuable personality 3) the menopause, in which she is at  
present. (I did not examine her. so she wishes me to see Parkinson.)

Heart Cases.

An Xian - So. Siachen!

H. J. Smith, Tibet.

1914

~~21~~ 21 5-8 Cadogan Sq. Balliol (4th)

V. L. as rule - at Winchester - generally ill. cold influenza &c.  
double pneumonia 1905. Is able to do a good deal.  
F.H. good. No 6 or 8, 7 & 10. well - as rule. Pretty well here. Last  
3 or 4 years at Xian 8 years. interested - certain amount. Morris  
darning. Now less. Pretty good appetite. Sleep well as rule. not well  
satisfied. cured not much of memory loss. This letter. bad on one, not  
able to concentrate - when do books a full scale. Schenck this year.  
What really came to pitch - I was unheard. not able to do anything  
did badly - no sleep. only did not meditate. Feb 7<sup>th</sup> 8<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup>.  
Ans 10 at Oxford. - longed. - wanted! Conch. 6-10 - 4. around it - not  
abrupt. - just slackness again! doing 6 has a week. - dumb. Pres. 3 d.  
a well known darning 1 hr. at time. Other days. other things not doing  
yet. Dred. 13 years. 10th. 7<sup>th</sup> 8<sup>th</sup> 9<sup>th</sup> 10<sup>th</sup> 11<sup>th</sup>. Eve. read. not not well - read. - paper.  
but not in eve. - but slack. Red. 10<sup>th</sup> 11<sup>th</sup> 12<sup>th</sup> 13<sup>th</sup> 14<sup>th</sup> 15<sup>th</sup> 16<sup>th</sup> 17<sup>th</sup> 18<sup>th</sup> 19<sup>th</sup> 20<sup>th</sup> 21<sup>st</sup>. Very lenient  
every collection only. does not work system 40. Sept. would go apt. self.  
wanted to work in staff of Xian 8 years. Hoped for self alone.

To read my way of life

He looks well; good colour; tongue is little furred; not very strongly built; muscles are rather flabby.  
V.M. re-action plus plus, hyperaemic.  
Pulse is good, reg., no tremor.  
Thyroid is not enlarged.  
Chest is long and narrow.  
Left clavicle little more prominent than right.  
A. B. visible in 5th.  
Lungs are clear in front.  
Heart sounds are clear, apex and base. Sounds are loud and widely transmitted.  
Abdomen is normal.  
Liver is not enlarged.  
Knee Jerks are plus plus.





Three brothers and one sister: nothing in the family. She looks well, good colour, always fresh colour; has walked quickly from Marston Ferry Road on purpose. One would not notice anything about the face except the high colour. It is a very fresh bright complexion, but there are not actual spots on the face. On the neck there is a rash of diffuse erythema, and there are numerous small raised white wheals, some of which go as high as the jaw. Over the chest there are a number of erythematous blotches. The whole back is covered with whitish wheals on a red background. There are none of them very large. It is general, all over, not localized in one place but worst about the mouth and neck. Some of the spots get bigger under observation. Did not notice special sensitiveness of the skin. On drawing a line with the nail there is at first an area of anaemia followed by a great deal of redness in the neighbourhood. No actual factitia urticaria. In front since dictating the note they have become more marked and are very intense over the shoulder. The pulse rate is good, no increase in tension. The heart sounds are clear. Has never had jaundice with it, never had any pain in the region of the liver. No liver trouble in the family; father and mother both well. There is no swelling of the joints, no enlargement of the liver, no tenderness over the gall bladder, which is not palpable. It is much worse on the trunk and on the arms than on the legs. At present it is marked over the abdomen. No enlargement of the lymph glands.

Myzomela pectoralis

March 21/15  
on Bird

~~Red~~ ~~59~~ 59. 11 and 12

no 2nd. Illness. no end of food acc. - cancers. spine & spine  
& had head killed open. no symptoms - slabs.

dark green. felt, rear could not walk. - had pain across back  
& curved. - Saw. D. 12 runs ago. 5 w. ran for hours. felt badly.  
not faint - this night feeling worse. pulled out sh. b. - sleep  
at night & around, at night. - Severe cold sensation & in the  
day. even so. walk. as well. - 2 w. later. not felt badly. not  
bed under but not down could do me. - v. active even.  
not weakness under the front of the body. - not back. no pain &  
well as before. - feet & legs never swelled. - was in bed  
in front of a few days. - not.

Looks well. good colour - grey  
Commencing Arcus - Tongue Clean - Good Teeth

Arteries R. Palpable - V.P. Brachials - easily rolled  
T. soft - Femorals Large easily felt -

Heart.

A.B. not visible - Manubrium.

Slight pulsation lower sternum

C. Impulse not palpable

Deep diffuse impulse

No increase superf. area dullness

Soft Apex Systolic - Sounds not loud best  
at lower sternum

Systolic audible L.S.B. not at Aortic Cartilage

In sitting posture C.I. not visible

After exertion A.S. much more distinct -  
Aortic 2<sup>nd</sup> comes out well

Percussion over Manubrium clear no tracheal  
Clear behind - no murmur over Aorta. <sup>tugging</sup>

## Invincible heart

Dr. Moore. April 1st 18-

Major. ~~Private~~ 39. 7th Inf. Keble College

V. h. m. - began to trouble with heart in 1891 after intense  
ill. April 1900 a cold, ear felt near to & one at a time was  
discovered. never reported since. When I died on 6 Nov  
had blood could hold a full right of rested for 2 years. Since it was  
had a 2nd falling from stable. was 57, in morning, in will leave 1/4 in  
true looking. looking but not much. Since not very hard and  
now 6. breathing. heart thump & suddenly a could go walk.

Jan 21. 1902. ... all ... dead ... 7. x 20 to 8. all 7 1/2

♀. filling out good; 6 rather young.  
 ♀. 1. full grown & well aged, plucked out, - 4 or 5 by good, best  
 weight. 12:3.

Silvery - ap. with a x pit and. up. a. - pers. do. - at - - - - -  
 no wing. soft and, white corner with top. & wing. - it band along stem.  
 side of d. limb and a clear. a. v. not easy to det. - it is not diff. to be in. up to  
 in 5th. and land a clear. - - - - - goes completely.

Recombination an effect that would disappear in further reappears with  $\epsilon_{\text{gen}}$  a possible result of and of a  $\alpha_{\text{gen}}$  not visible - not sy. no increase in anthesis.

- 1) To stop all tea - coffee - lab + 8 hours -
- 2) Go ahead with work - (3) Table as much time with needs as possible.

Mrs ~~██████████~~ Savanna 56

2 y. complaints of headache & nerv. of getting a shudder - attacks in  
 her head. Paries & gets giddy. Lashes twitting. B. pres 230. goes up.  
 & a lot of dyspepsia & also a pain in head.  
 H. 4. w. nervous & worrying dis. + 3. 5d stup. of limbs at 26 - fever  
 & paries - at 19 open for bronch. piles. 7. 4. On m. side thermometer  
 & at 76 a shudder. 7. 5-4 d. of chill & tumor. 2. 5. no brood.  
 about 2 y ago with walking & had a giddy presenile in brain & fell to wall  
 & could walk - at no time has fallen. Has had sev attacks since mine  
 severe. got opening & shuddering in brain. & similar press in forehead.  
 h. - beating in heart & p at 36 & now at 36 was not ~~not~~ so at 36. was  
 70. - Pulse gets more rapid when gets ~~get~~ up & about rises to  
 48. - Has had 3 giddy attacks - now a down sensation - when to brain  
 but now a dull feeling & lag. so limb. & clutch at everything. lag. in  
 Saw Dr Young 2. 5. ago.

She looks well, good colour, eyes are clear, no arcus.  
 Pupils react actively to light. Tongue is clean. Teeth  
 are good. Pulse is reg., 36 to the minute. No inter-  
 vening small beat felt. It is markedly recurrent. Eas-  
 ily rolled under the fingers; with the blood out the  
 artery is scarcely palp. The brachials can be readily

(Over)

rolled under the fingers. The carotids both pulsate; they do not feel specially sclerotic. No venous impulse in neck. Slight pulsation in external jugular vein. A.B. visible in 5th, locks little forcible. It is felt exactly 5ins. from the mid-sternum. The impulse extends over wide area in the interspace; does not lift either the 5th or 6th rib. There is a general jog of the front of the chest. The manubrium locks little prominent; skin is clear; no distended veins. Distinct impulse on manubrium; marked when she holds her breath. Lifts the whole of the front and the top of the chest. Palpation: it is visible, fingers are lifted; there is a slow heave. It is more marked in the manubrium than in the middle of the sternum, where it is scarcely visible, and it lifts the sternal end of the clavicle on both sides. The finger in the sternal notch is lifted and a diastolic shock felt; no shock of either sound felt over manubrium, or of the heart impulse. A.C.F. begins on upper border of 4th, does not extend beyond right sternal margin. Manubrium is clear on light percussion. On deep percussion not quite so clear resonance in the manubrium as in the middle portion. Apex, systolic bruit propagated up left sternal margin, obliterates the first sound, second is audible. Both sounds are heard at the base; distinct systolic with the first, propagated up the manubrium. Second sound is accentuated. No diastolic murmur. The radials are equal on the two sides. The pupils are equal. Throbbing on manubrium is neither so vis. nor so palp in the sitting posture. After exertion no special difference in the pulse, which remains at 36. Knee jerks are present.

~~4~~ ~~1~~ ~~2~~ 20. 18 albina Rd. Henschelmann Brothers

Sch. for 3'11 3/4 ago. light, 18 1/2 in. sharp fever & had the 83.  
Henna rash. like barnacle on a rock (Dr. Gerritt of Kingston)  
2 pps not a crop. clusters. none on face - hands raised in Ulnars  
on the back - on feet - sup the legs - not in the body.

reflex not visible at the head was inflexible. not during the 86  
even. Since has been yellow. a shock attack under a tubular

at 84-85. 2. Hand earlier said he was affected. Did not get to  
head. is sup. 1 "spodios across the 2 pps" ... with.

is not, even well is under a dry. skin was an abundant  
looks well. a tubular ... a vent. After die

83-ago dropped dead in the buff. - Great swollen. was 43-  
I had been a del. man. Small man. 3 children well & strong

very under aged. this boy 5 1/2

Clear in case - under eye heavily inflamed. Good under.

in v. just no. also visible. No. visible in the stern right angle, ...  
def. ... no ... 18 Mo. ... 8. ...  
it ... 3 ... 1 ... 1 ...  
... a ... 1 ... in the region ...  
sum end of the heart but I doubt of val. disease.

Oct 13/15

~~21 Southam Rd~~ 21 Southam Rd Bury.

"I want controversy about my heart" such a "living" 3 y ago  
 had pneumonia & inf. I was laid up a while. moved (Dr. Heald)  
 at 10 am. saw Guy to surgeon to pass the Dr. at Sunday  
 saw at 2. (Dr. Swinoe) who said heart was "all over the shop"  
 came home at 6 saw Dr. B. told him. he was sure it was  
 with 400. I was beat at a regular heart I found. I got other  
 ad. saw Dr. Slope & Dr. & after me & said nothing wrong but  
 only worried. sent home & to come back in 14 days. Then saw  
 Dr. Under. des. mollen to him. & after, said "heart all right"  
 sent home & to come back in 14 days saw Dr. W. Lighter. came  
 again & told me to come back in 14 days. I was very angry  
 coming. went to Dr. & told him & he was angry & challenged me for  
 seeing other Dr. & still held that heart was all over the shop. Went  
 to Bury. wrote Dr. Slope who wrote to Surgeon. In brief under  
 Dr. Slope for 14 days & he said magnificent. saw all night  
 des. & went to Dr. again & Dr. said magnificent. said magnificent. &  
 sent me for him to have an opinion. allowed to start work in  
 a chambering way. From that date till last week everything  
 went & day. 14-hrs a week with heart. Dr. S. saw heart  
 again & said it was quite right. says now. I will  
 not let him run in main line. now want calling mollen a  
 to let it right is wrong. I sent night with all went  
 11.11.15. 12.11.15. 13.11.15. 14.11.15. 15.11.15. 16.11.15. 17.11.15. 18.11.15. 19.11.15. 20.11.15. 21.11.15. 22.11.15. 23.11.15. 24.11.15. 25.11.15. 26.11.15. 27.11.15. 28.11.15. 29.11.15. 30.11.15. 1.12.15. 2.12.15. 3.12.15. 4.12.15. 5.12.15. 6.12.15. 7.12.15. 8.12.15. 9.12.15. 10.12.15. 11.12.15. 12.12.15. 13.12.15. 14.12.15. 15.12.15. 16.12.15. 17.12.15. 18.12.15. 19.12.15. 20.12.15. 21.12.15. 22.12.15. 23.12.15. 24.12.15. 25.12.15. 26.12.15. 27.12.15. 28.12.15. 29.12.15. 30.12.15. 1.1.16. 2.1.16. 3.1.16. 4.1.16. 5.1.16. 6.1.16. 7.1.16. 8.1.16. 9.1.16. 10.1.16. 11.1.16. 12.1.16. 13.1.16. 14.1.16. 15.1.16. 16.1.16. 17.1.16. 18.1.16. 19.1.16. 20.1.16. 21.1.16. 22.1.16. 23.1.16. 24.1.16. 25.1.16. 26.1.16. 27.1.16. 28.1.16. 29.1.16. 30.1.16. 1.2.16. 2.2.16. 3.2.16. 4.2.16. 5.2.16. 6.2.16. 7.2.16. 8.2.16. 9.2.16. 10.2.16. 11.2.16. 12.2.16. 13.2.16. 14.2.16. 15.2.16. 16.2.16. 17.2.16. 18.2.16. 19.2.16. 20.2.16. 21.2.16. 22.2.16. 23.2.16. 24.2.16. 25.2.16. 26.2.16. 27.2.16. 28.2.16. 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Nov 18/15-

On Weston

The Prov. General  
Tuxtepec).

C. y. *Bradycardia* Dardanelles 25-Apr to 10 July, was all well in June  
and early in July, but somewhat ill in early April. I was  
ill and lost generally, and had a severe attack of  
after 3 w in "Cly. in Small House" and 26 Aug. Travelled Sept 14  
and 15. Cold and Rh. came on. Heart. better. R. was well & I  
was well. Took at 11. Gained 15. 100 lb. at 11. 22  
health. ~~But~~ home. Now ill 25th Nov. Weymouth dept.

1) The ... ..  
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July 20. 22. This is the first diagnosis of "D.A.H.", that I found in the records. Thomas McCune



Mythema.

on the edge of the pond  
Aug 24/16

Dr. Cassey

~~10~~ 10. Tilden Rd Reading

... all 5 and 3 ...

... 11-12 ...

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3) a few faded spots in eggs. (4) Host clean - well past a  
middle generation. 5) Splend. lar. not retained. (6) 7 in 10 are retained  
7) with. clean. no larvae in 10: come down. P. Blood  
and. etc.



Went to see Dr. Cross about eyes who said one bottle of my eye water  
gave glasses.

He tried to take the K br in the eyes without the

redness & burn to the eye.







~~John H. Hooten~~ 36. Cottonmouth Neothames.

W. as child. . . more bleed at s. & body.  
 Tonsils removed 1880 no bleeding. . 1903. - began to  
 bleed body. - gums & nose - . spots began 1904.  
 Every year since. never free. for mos. . Body has been  
 more. not for last year. . not ill. no severe colic except one  
 time spring - had 8 hours the doctor. & vomited. no other

- 1) deb. looking. 2) purple on forehead & cheeks. 3) gums  
 swollen. 4) no aneurysms. 5) many bruises on arms &  
 hands. 6) very low on legs. often at knee - by a fall  
 of hand. . 7) no rot of spleen. 8) no aneurysms

Aortic Insufficiency.

Dr Southam  
Nov 4/16

Mies ~~is~~ ~~the~~ ~~patient~~ - Villavieja 33. Derby - private school.

V. g. h. as rule - not v. st. good. cur. append. 103 ago. heard  
16. <sup>16.</sup> ~~transluc.~~ <sup>transluc.</sup> ~~bulb.~~ malaria in India. & in Africa. in Nat. in 14 years. now  
ague attack. ~~is~~

P.T. took to fainting - was hauled into a shop. 3 or 4 times  
last time yesterday am. dizzy head. dropped. felt badly for  
moment & then nothing more. was in bed a few seconds.  
went on as usual & gave a lesson - in 5. Has to do a good  
with older woman. Cannot go on. Begins legs? & great deal of  
business. not best in heart. but to purify. no one seen - but have  
pulse. - but sometimes redness. C. in. - women - all people - 7. have  
& 4 br. - work intensely. - very short incident - for years going  
upstairs.

1. P. v. c. l. then. 14 h. reg. not compare. (3). heard act. wide  
spr. left large red. (4) no thrill. ~~no~~ no vis. but in br. is red  
m. (5) S. clear at abd. (7) low alen. & def. discol. border  
to left many alen. heard d. a. c. (8) loud systolic at  
pul. area 4% abd.

# Recurring paralysis.

28th/16  
Dr Rice

May. ~~1913~~ ~~1914~~ 37 Army Ord Dept.

H. + 1913 - 29 before 11-12 years of corditis sept. small  
 from cutting corditis. Had slight pain in rev. months corditis  
 head on Aug 13 - parot left side suddenly - could not  
 walk 3 or 4 in box & 6 or 7 in before could walk. (Dr Holdam &  
 Had galls on E. & L. saw him - 5th well but left hand  
 shaly & suby. feeling in left leg - Back at it in May 1914 - on  
 Aug. 14 hand work & slight relapse. slight pain in same hands  
 not 11-12 could not move but arm & leg fast sleep. - That  
 is more or less permanent. - very slight but there - does not last  
 was a shock. Came to Oxford in June at night & then to  
 Salisbury 7 or 8. 2nd paroxysm attack - led off by dead faint  
 in back & head & feet round. then partly paraly. could not  
 use left hand (is l. h. man) - for 3 weeks. could walk abn  
 more severe now but lighter than first. left side up. while  
 at Salisbury in Feb. one day slight loss of power in right  
 leg. - could definitely last a week. No headache. leg well  
 otherwise. not lost in it - but in exercise.  
 11th no signs. - however May 17. 1902. - more & 1. Thelton & not much

H.L.M. — good physique. pupils equal.  
react to light. unres face more red.  
D. straight - feeling perfect. L.A. the largest.  
all movements perfect - grasp is good - sensation  
is good. stands on toes & heels. all movements of  
ap perfect. knows all the movements.  
knows what is in hand - ~~Q.K.~~ j.t. + -  
says he fumbles with his hands. unlaces his  
boots well - no toe or ankle reflex -  
achilles + — arteries. radials palpable.  
tension + - radials recurrent — brachials  
very firm. temp: palpable & tortuous. ap: bt. below & just  
inside nipple - lifts the fingers. corneas clear. apex & base —  
sh. aortic stiff. cy. tone. 2nd loud. hoir not enlarged. spleen  
is just palpable -